PATHWAY TO ACADEMIC STABILITY AND SUCCESS (PASS) FINAL REPORT Grant Period: October 1, 2012 - September 30, 2014 Award #90C01083101 Bibhuti K. Sar, Ph.D., Principal Investigator (b.k.sar@louisville.edu) Crystal Collins-Camargo, Ph.D., CO-PI (crystal.collinscamargo@louisville.edu) Emma M. Sterrett, Ph.D., CO-PI (emma.sterrett@louisville.edu) Becky F. Antle, Ph.D., Evaluator (becky.antle@louisville.edu) Jenny Taylor, MSW, Program Manager (jenny.taylor@louisville.edu) **University of Louisville** Louisville, KY 40292 June 30, 2015

Pathway to Academic Stability and Success (PASS)
Final Report
Grant Period: October 1, 2012 – September 30, 2014
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ABSTRACT

The overall purpose of the Jefferson County, Kentucky's Pathway for Academic Stability and Success (PASS) demonstration project was to promote academic stability and success of foster youth in 6th thru 8th grade at risk for dropping out of school. Research and practice experience indicate that foster youth are at risk for poor outcomes with regards to their educational attainment and success because of a) ongoing behavioral and emotional problems and trauma due to past abuse and neglect, b) stigma and discrimination associated with "being" a foster youth, c) lack of emotional and behavioral connectedness to school, d) placement instability and concomitant school disruption, e) lack of availability as well as appropriateness of education interventions, f) being in systems that lack a method for tracking their academic progress and portability of their school records, g) lacking and/or inconsistent monitoring, accountability, and advocacy for youth's educational plan, h) cross-systems communication and information exchange barriers resulting from confidentiality rules and regulations, and i) fragmented interagency collaboration/coordination among systems of care because of isolating/silo-ing policies, procedures, and practices. The Kent School of Social Work, University of Louisville in partnership with Kentucky Department for Community Based Services, Jefferson County Public Schools, Family and Children's Place, and Jefferson County Family Court, evaluated the Pathway for Academic Stability and Success (PASS) demonstration project by targeting 100 foster youth in 6th thru 8th grade in Jefferson County, KY over the 2 year grant period. The project approach focused on assessing and developing interagency infrastructure to more effectively respond to the educational needs of youth in care, and tracking and addressing the needs of the youth through the work of Student Success Navigators who coordinated the work of representatives of the partner agencies to promote educational stability and success for individual youth.

I. Executive Summary

General Overview of the Program: Funded by the Children's Bureau, US Department of Health and Human Services (DHHS), the overall purpose of the Jefferson County, Kentucky's Pathway for Academic Stability and Success (PASS) demonstration project was to promote academic stability and success of foster youth in 6th through 8th grade at risk for dropping out of school. The Kent School of Social Work, University of Louisville in partnership with Kentucky Department for Community Based Services, Jefferson County Public Schools, Family and Children's Place, and Jefferson County Family Court implemented and evaluated the Pathway for Academic Stability and Success (PASS) Demonstration Project by targeting 100 foster youth in 6th thru 8th grade in Jefferson County over a two year period (2012-2014). The project focused on assessing and developing interagency infrastructure with the goal of enabling the partners to more effectively respond to the educational needs of youth in care, by tracking and addressing the needs of the youth through the work of Educational Navigators who coordinated the work of representatives of the partner agencies to promote educational stability and success for individual youth. Process and outcome evaluations were conducted to ascertain project impact. Finally, this project developed and identified resources for other regions of the state and nation seeking to develop their capacity and infrastructure to promote the academic stability and success of foster youth in their communities.

Summary of accomplishments and outcomes. We were able to fully assemble a project team and implement the PASS project. For a two-year period, we were able to work actively through the Project Steering Committee (PSC), which included representatives from child welfare, JCPS, family court, community mental health, and the University of Louisville, to bring

awareness and change to meet the educational needs of foster youth. A legal data sharing agreement between JCPS, University of Louisville, and Family and Children's Place was drawn up and signed to facilitate our work.

We were successful in gathering the voices of broad range of key stakeholders in identifying the issues associated with meeting educational needs of foster youth. We conducted seven focus groups (two were conducted with public school personnel including school counselors, Youth Service Center Coordinators, and Directors of Pupil Personnel; one with child welfare case workers; one with middle school foster youth; one with birth parents; one with foster parents; and one with family court judges and attorneys). On average each focus group consisted of 4- 12 participants with a total of 58 participants. The results indicated the need for change in policies and practices of how foster youth with educational difficulties and needs are identified and served, the need for education and training of professionals on federal, state, and local educational policies and practices as well the psychosocial issues that come with being placed in foster care, the need for a coordinated effort that is navigated across systems of care by designated professionals that intentionally champion addressing the educational needs of foster youth.

We conducted a comprehensive review of existing policies and procedures, which has led to a data sharing agreement among project partners, possible changes at the family court level on requiring educational reviews/assessments, and input that led to revisions to the State Child Welfare Agency's Standards of Practice (SOP) SOP 4.28.3-Educational Passport, which guides caseworkers on best practices on educational assessments of children/youth coming into out of home care.

We researched and reviewed literature related to evidence-based and promising practices on educational engagement, stability, and success. We identified and received permission to use and modify two trainings (Endless Dreams by the Casey Family Foundation and Advocating for the Educational Needs of Children in Out-of-Home Care: Training Curriculum for Foster Parents by Dr. Helen Ward) to meet our needs particular to Metro Louisville./Jefferson County. We developed and tailored trainings to educate child welfare workers, teachers, school counselors, foster parents, and foster youth on meeting the educational needs of foster youth. We trained foster parents, foster children, child welfare workers, Neighborhood Place caseworkers, and educators/school counselors/personnel.

We trained two Educational Navigators in the PASS practice model and in understanding the child welfare system, the educational system including exceptional child education, and the process that occurs in Family Court. They worked directly with foster youth to not only address their educational needs but also other psychosocial needs that posed a barrier to their success at school. They also coordinated with other services providers across other systems of care and advocated for change in services and resources for foster youth.

We evaluated our infrastructure building/change efforts, training efforts, services delivery efforts, and collaborative efforts with program partners. We found that in regards to services provided to foster youth, the survey data shows improvements in areas of trauma and school engagement, as well as key areas of strength and risk experienced by foster youth. As for our collaboration work, collaboration scores improved over the course of the project suggesting that PASS project partners worked well to accomplish the goals and objectives of PASS. Stakeholder interviews supported the important role of navigators in obtaining/exchanging information and advocating for children. Steering committee qualitative feedback provided

helpful insights into success factors, barriers, additional changes needed, impact of the project and ways to continue/sustain these efforts by various agencies.

II. Introduction and Overview

A. Overview of the community, population, problem being addressed and collaborative partners. *Description of the community*. Louisville is the largest city in the Commonwealth of Kentucky and the 28th most populous city in the United States with nearly 600,000 inhabitants. Between 2008-12, the child poverty rate in Jefferson County was 25% (http://kyyouth.org/wp-content/uploads/2014/09/2014 KidsCount FINAL.pdf). In 2010, 18,332 Kentucky children were victims of abuse or neglect, a rate of 18.1 per 1,000 children. Of these, 96.4% were neglected, 8.5% were physically abused, and 4.5% were sexually abused. Eighteen Kentucky children died as a result of abuse or neglect in 2011. The number of children in out of home care decreased between 2009 (n=1,023) to 2012 (n=752) but began to rise in 2013 (n=854) (http://faceitabuse.org/jefferson-county-child-welfare-data-dashboard/).

Description of the lead organization administering the demonstration project. The Kent School of Social Work has a long history of providing training and conducting research in addition to offering BSW, MSSW, and PhD degrees. The school has provided training as a part of the statewide Training Consortium since the early 1980's and has evaluated Kentucky's child welfare training since 1992. Since 2001, it has successfully administered demonstration grants from DHHS (ACF, CB, OFA) in the areas of child welfare practice, relationship education, foster youth transitioning into independent living, strengthening adoptive family relationships, and diligent recruitment of foster/adoptive families.

Target Population. The target population for this project were youth in out-of-home care in Jefferson County, KY who were in the sixth, seventh or eighth grades and placed in their

home county. Approximately 90% of Jefferson County foster youth are placed in the county. There were 79 youth meeting this criterion at the start of the project. Of these 79 youth, 59.5% were African-American, 38.0% were White, non-Hispanic, 1.3% were Hispanic, and 1.3% were Other Ethnicity/Mixed Ethnicity/Unknown. There were more males (58.2%) than females (41.8%) in this cohort. A small percentage (1.3%) had limited English proficiency. A significant percentage (40.5%) were considered to be functioning at an early childhood educational level. One of the youth (1.3%) has experienced grade retention. The average school attendance for these youth was 93.5%. Only 29.2% of this cohort passed the Kentucky Core Content (KCC) Reading Exam and only 32.2% passed the KCC Math Exam.

Identified Problem. There is a great need for child welfare and education agencies to improve educational stability and permanency outcomes for middle- to high-school aged children in child welfare. The professional literature provides significant foundation for understanding individual, familial, community and systemic contributors as well as potential solutions, which undergird the approach taken in the PASS project. A significant problem that requires addressing is that of educational instability among foster care youth. Educational instability is part and parcel of the foster care experience for many foster care youth (Burley & Halpern, 2001; Courtney, Dworsky, & Pollack, 2007). There are multiple contributing factors involved in this equation. Foster care placement disruptions (Crozier & Barth, 2005; Harden, 2004; The Center for Human Services, 2008), changing homes and home environments (Legal Center for Foster Care and Education, 2007), changing schools and school environments (Allen & Vacca, 2010), traumatic childhood histories (Pecora et al., 2005), lack of remedial education services (Vera Institute for Justice, 2004), lack of clinical services (Zetlin & Weinberg, 2004), health and mental health mis-diagnoses (Kortenkamp & Ehrle, 2002), developmental delays

(Bass, Shields, & Behrman, 2004), social, emotional and behavioral problems (Atkinson, 2008; Christian, 2003; Zetlin, Weinberg, & Shea, 2006), truancy (Smithgall et al., 2004), substance abuse problems (Wood et al., 1993) and other deleterious factors combine to undermine the educational stability of foster care youth (Kerbow, 1996; Zetlin, Weinberg, & Shea, 2010). Other researchers have filled in some of the details about the contributing factors to educational instability among foster care youth and their concomitant outcomes. Children and youth in outof-home care experience on average one or two foster care placement changes per year. Onethird of children in foster care stay in care for less than five months and another 17% remain in care for one year or less (U.S. DHHS, 2006). Over a third of young adults formerly in out of home care reported having had five or more school changes (Courtney, Terao, & Bost, 2004). Frequent school changes are associated with an increased risk of being retained a grade in school and of repeated behavior problems (Trout et al., 2008; Wood et al., 1993). Multiple foster care placement disruptions contribute to foster children's further trauma and damage to their social, emotional and cognitive development (Harden, 2004; The Center for Human Services, 2008). Children and youth in foster care face significant barriers to positive educational experiences and academic achievement (Munson & Freundlich, 2008). Most children who enter foster care have had their chances for healthy development (including cognitive development) undermined by many deleterious conditions in their lives (Bass, Shields, & Behrman, 2004). There is an increased occurrence of physical, emotional and behavioral disorders that may interfere with maltreated children's learning (Christian, 2003). Maltreatment-induced PTSD in children has been found to be associated with low grade point average and declines in attention and taskrelated skills that may substantially impair academic performance (Saltzman et al., 2001). Child maltreatment is associated with significant developmental delays in school-age children,

including intellectual development, language development and academic achievement (Katz, 1992; Law & Conway, 1992; Pears et al., 2011; Rutter, 1987; Veltman & Brown, 2001; Zima et al., 2000). Foster care placement instability results in behavioral problems which, in turn, are associated with poorer educational performance (Crozier & Barth, 2005; Zetlin, MacLeod, & Kimm, 2012). Difficult school experiences are strong predictors of later difficulties in maltreated children's adolescence and adulthood, such as school dropout, substance abuse, juvenile delinquency, unemployment and increasing need for welfare assistance (Bamba, 2005). This demonstration program will attempt to mitigate the effects of these factors that contribute to educational instability and move at-risk foster children toward greater educational stability.

A related problem that requires more attention is that of *foster care student educational deficits* and unmet educational needs. There is a plethora of research literature focusing on the educational deficits and unmet educational needs of foster care youth. It is ostensibly clear that foster care youth have substantial educational deficiencies and profound educational needs that very often go unmet in the educational environment (Zetlin, Weinberg, & Shea, 2010; Zetlin, Weinberg, & Shea, 2006). Children in foster care are often highly mobile and struggle academically (Allen & Vacca, 2010; Atkinson, 2008; Zetlin, Weinberg, & Shea, 2010; Zetlin, Weinberg, & Shea, 2006). Mobility affects the educational outcomes of children in foster care (Allen & Vacca, 2010). Independent effects on educational outcomes of foster care youth include a history of poverty, residential mobility of families, maltreatment and not living with biological parents (Stone, 2007). Efforts are underway to improve education outcomes for children in foster care but much more work is needed (Legal Center for Foster Care and Education, 2007).

There are a myriad of negative educational sequelae associated with being in foster care. According to Smithgall et al. (2004), fifteen year old students in out of home care are about half

as likely as other students to have graduated from high school five years later, with significantly higher percentages of students in out of home care having dropped out (55%) or been incarcerated (10%). Only 54% of young adults who age out of foster care have completed high school (Cook, 1994). Former foster youth have higher rates of high school drop-out compared to their non-foster care youth peers (Barth, 1990). Many foster care youth exit foster care without a high school diploma or a GED (English, Kouidou-Giles, & Plocke, 1994). The percentage of former foster youth age 21 neither graduating from high school nor obtaining a GED is reported to be 23%, more than twice the rate of a nationally representative sample of same age peers (Courtney et al., 2007). Only 59% of foster youth enrolled in the 11th grade graduated from high school on time compared to 86% of non-foster youth in the 11th grade (Burley & Halpern, 2001). In a national study of 1,087 foster care alumni, youth who had one fewer placement change per year were almost twice as likely to graduate from high school before leaving care (Pecora et al., 2003).

Lack of academic achievement and high risk of academic failure is pandemic in the world of foster care children (Noonan et al., 2012; Zetlin, Weinberg, & Kimm, 2003). Youth who have spent time in foster care lag behind the general population vis-à-vis educational attainment, especially post-secondary education (Pecora et al., 2005; Zetlin & Weinberg, 2004). Foster care youth are at high risk for poor educational attainment compared with their general population peers (Courtney & Dworsky, 2006; Courtney et al., 2007). Research shows that educational achievement is a major problem for foster children in school (Sawyer & Dubowitz, 1994). Children who are neglected or abused and enter foster care are at great risk for school failure (Zetlin, MacLeod, & Kimm, 2012; Zetlin & Weinberg, 2004; Zetlin, Weinberg, & Shea, 2010).

The educational deficiencies of foster care youth are glaring and alarming. Youth in foster care attending public schools score 16-20 percentile points below youth in the general population on statewide standardized tests (Burley & Halpern, 2001). Youth in foster care on average read at only a 7th grade level after completing 10th or 11th grade (Courtney, Terao, & Bost, 2004). Children in foster care, compared to their peers not in care, have higher rates of grade retention, lower scores on standardized tests, higher rates of absenteeism, higher rates of truancy and are more likely to drop out of school altogether (Pecora et al., 2005; Smithgall et al., 2004; Vera Institute of Justice, 2004; Yu, Day, & Williams, 2002). By the sixth grade, students who change schools four or more times lose approximately one year of educational growth (Kerbow, 1996). Maltreated children have been found to have higher than average rates of absenteeism, poor grades, low achievement test scores, grade retention, behavioral problems in the classroom, placement in special education classes and dropping out of school (Blome, 1997; Christian, 2003; Kurtz et al., 1993; Leiter & Johnson, 1997; Rowe & Eckenrode, 1999). Three-quarters of foster care children perform below grade level (Smithgall et al., 2004). More than half of foster care youth have been retained at least one year in school (Berrick, Courtney, & Barth, 1993). Foster care children perform significantly lower on standardized achievement tests in reading and math and earn lower grades in these subjects (Emerson & Lovitt, 2003). A California study found that foster care youth had lower grades in school and lower educational expectations and aspirations (Farruggia et al., 2006). Students living in out of home care are disproportionately represented in special education (Scherr, 2007). The Midwest Study (longitudinal) of 732 Iowa, Illinois and Wisconsin foster care children who "aged out" of the foster care system revealed that nearly 40% had to repeat one or more grades during elementary and secondary school (Courtney, Dworsky, & Pollack, 2007).

The unmet educational needs of foster youth are egregious and profound. School staff is frequently unaware that some students are in out of home care or unaware of foster care placements effects on educational performance (Zetlin, Weinberg, & Kimm, 2004). The educational barriers foster children experience are exacerbated if school staff has a negative perception about the student due to his or her prior academic and social history (Vacca, 2004). Many foster care students are not provided fair instruction or opportunities for academic achievement (Emerson & Lovitt, 2003). The education of foster children is often overlooked and they are one of the most educationally vulnerable populations in our schools (Zetlin, Weinberg, & Shea, 2006). Foster care youth are more likely to need special education services than nonfoster care youth (Seyfried et al., 2000). Foster children receive lack of preparation for college (Lemon, Hines, & Merdinger, 2005). The personal histories of foster children and their impact on academic performance are either misunderstood or go unnoticed by school personnel. Additionally, few learning supports are made available by schools to address the significant academic, emotional and behavioral problems many foster children face (Zetlin & Weinberg, 2004). Foster care youth educational problems and needs include the following: 1) learning gaps that lead to a referral to special education; 2) reading problems; 3) lack of supports need to "catch up"; 4) poor attendance; 5) acting out at school; 6) lack of understanding and empathy from school principals and staff; 7) moving around to multiple schools; 8) delays in receiving school records or incomplete records, resulting in students losing academic credits for classes they attended or being enrolled in the wrong classes; 9) schools being unaware of a student having an IEP at their previous school and their need for special education placement and related services; 10) foster care students go unnoticed and un-assessed and their educational needs go

unserved; and 11) no prevention or early intervention at schools (Zetlin, Weinberg, & Shea, 2010).

Obstacles to education of foster care youth include lack of continuity in education, lack of emphasis on education, low academic performance expectations, absence of educational advocates, the burden of past experience, the stigma of being in foster care and the gap between child welfare and educational systems (Vera Institute for Justice, 2004). A major contributing problem is that of school record transfer delay. School personnel have a difficult time tracking down prior school records of foster children who transfer to their school (Emerson & Lovitt, 2003). In a study of foster care children in Los Angeles, Zetlin & Weinberg (2004) found that less than 20% of student records were available and 75% of student records had incorrect data inputted. Zetlin, Weinberg, & Luderer (2004) found that the length of time needed to track down school records for foster care students ranged from three weeks to eight months, with the average retrieval time being two months. Many foster care children do not receive the special education services they need and much of this is due to school record transfer delays (Weinberg, Zetlin, & Shea, 2001). Since the 1990s, the research literature has consistently revealed that the educational needs of foster care children have been poorly addressed and these children remain at greater risk for adverse educational outcomes (Gustavsson & MacEachron, 2011). To add insult to injury, there is little or no accountability or monitoring of foster children's educational progress by either child welfare systems or educational systems (Zetlin, Weinberg, & Shea, 2006).

Kentucky foster youth experiences mirror what has been reported in the literature in regards to the problem of unmet educational needs. The Kentucky Foster Care Census (Huebner et al., 2003) found that one-third of the foster care children in the sample (n=2,996) had an

identified educational need required to be addressed by the educational system. Older children had more educational needs than did younger children. Boys were more likely to have educational problems than girls. As the number months in care and the number of prior placements increased, so did the percentage of having an identified educational need.

According to data provided from the Kentucky Department for Community Based Services (DCBS), foster children living in Jefferson County, KY (the target area for this proposal) have several risk factors present that could potentially impact their educational stability. Substantiated child maltreatment or 'services needed' reports between May 1, 2011 and April 30, 2012 totaled 3,304. The risk factors present in the lives of these foster care children included: 1) income issues; 2) domestic violence; 3) substance abuse; 4) mental health issues; or 5) two or more of these risk factors. The types of maltreatment reported included: 1) neglect; 2) physical abuse; 3) sexual abuse; and/or 4) emotional abuse.

Another contributing factor to the educational problems experienced by foster youth is the *problems associated with interagency collaboration*. Zetlin, Weinberg, & Shea (2006) called attention to both the lack of cross-agency data sharing and the lack of monitoring of school outcomes vis-à-vis foster care youth. Noonan et al. (2012) recently pointed out that ground-level stakeholders from child welfare and education systems exhibited highly variable knowledge and implementation of policies related to the educational needs of foster care children in a series of focus groups they conducted with 90 participants that included caseworkers, foster parents, school counselors and teachers. They also identified other cross-system barriers to foster children's educational success. These included: 1) ineffective and limited cross-system communication; 2) role uncertainty among stakeholders; and 3) prevalence and complexity of behavioral health needs among foster care children.

In addition to the foregoing, and perhaps of even greater import, no one agency has the resources or expertise to provide the services and supports required to address the unmet educational needs of foster care children (Zetlin, Weinberg, & Shea, 2006). Innovative interagency or cross-system collaboration is required to tackle this problem (Berliner, 2010; Gustavsson & MacEachron, 2011; Leone & Weinberg, 2010; Zetlin, Weinberg, & Shea, 2010; 2006). Improved cross-system collaboration will be required to address the complexity of mental health service provision for foster care children with behavioral problems, as this significantly impacts their educational stability (Noonan et al., 2012). The meta-issue, however, is that talking about the merits of interagency collaboration and coordination appears to be much easier than actually implementing interagency collaboration (Zetlin, Weinberg, & Shea, 2006).

In Kentucky, there is certainly the recognition for interagency collaboration for the educational success of youth in foster care. Indeed, there is some discussion underway at the state level between the Courts (Truancy Diversion Program) and Kentucky Department for Community Based Services to establish a process to determine whether the educational needs of children in foster care are being met through a multidisciplinary approach. Meetings are planned with the Commissioner of Education to discuss the courts' role in developing a comprehensive plan of ensuring children in out-of-home care receive appropriate educational opportunities (http://apps.americanbar.org/abanet/child/statesum/state.cfm?state=KY).

At the local level specific to Jefferson County, interagency collaboration around foster youth's educational stability and success has been slow to being realized to have any real impact. Although Jefferson County is an urban community in which the agencies collaborating on this proposal work together on a daily basis on meeting the needs of the child welfare population, the organizations agree that they largely work in silos. Confidentiality policies and lack of data-

sharing inhibit communication and collaborative response to the educational needs of many foster youth. Jefferson County Public Schools have observed that the transition period between elementary and middle, and middle and high school are critical junctures related to academic performance, engagement and dropping out later. However, there has been no coordinated effort to identify those youth at risk and provide and interagency preventive response focused on promoting the development of protective factors and relational competencies in youth, and positive academic engagement. Judges in the Family Court report seeing the effects of these failures in truancy and related behavioral responses that bring foster youth back before them in court. There is an identified need for collaborative infrastructure focused on educational needs of youth in out-of-home care.

There is much potential and experience among the partners in this project to establish and sustain a collaborative infrastructure. Currently, there are a variety of coalitions in Jefferson County and agencies work together to strengthen children and families. The Race, Community and Child Welfare coalition addresses the disproportionality of children of color in the child welfare system. The Metro Louisville Alliance for Youth targets the social, educational and developmental needs of all youth, advocating for additional funding for out-of-school time services. There are two groups addressing the exposure of children and youth to violence. The Bingham Fellows, the leadership-in-action arm of the Leadership Louisville Center is currently studying the local education system. Their study topic for 2012 is "Creating a path to prosperity - Engaging the community to inspire student achievement." This group, composed of over forty of the city's leaders will focus on the macro issues and barriers in the full spectrum of education, pre-school to higher education.

Jefferson County Public Schools (JCPS), the largest urban school district in Kentucky (Louisville) and the 29th largest district in the nation, has more than 101,000 enrolled students. It has 172 schools (89 elementary, 23 middle, 19 high, 2 combined, 39 special), employs 6,400 teachers, and has 81.1% of the county's school-age children enrolled in its schools (http://www.jefferson.k12.ky.us/About/About.html). In 2012-2013 at the start of this project, JCPS student demographics were as follows: 35% percent African American, 52% Caucasian, 5% Hispanic, and 8% were other race/ethnic group. Furthermore, 13,191 students received exceptional child education (ECE) services and 5,400 were limited English proficient. Sixty-two percent qualifed for free/reduced lunches. There were 21,244 enrolled in grades 6-8, and 731 children in Jefferson County were in out-of-home care with active placements.

According to data supplied by the Kentucky Department for Community Based Services (DCBS) (2012), the age at first entry into foster care breaks down as follows: age less than one year (22.0%); age 1-3 years (12.2%); age 3-6 years (14.5%); age 6-12 years (21.6%); and age 12-18 years (29.7%), with the median being 7.2 years. The average age of children currently in out-of-home care is 10.3 years. Jefferson County foster children spend an average of 32.2% of their life in out-of-home care. The average number of days to re-enter out-of-home care for children with any re-entry episodes is 984.7 days. These children experience and average of 3.5 out-of-home placements. During the 2011/12 academic year, there were 79 students (grades 6-8) in foster care enrolled in JCPS. Almost half of those students were receiving Exceptional Child Education from the district which means additional support and services because they learn differently than their peers. Less than one-third of these students scored at least proficient on state assessments in reading and math. During the 2011/12 school year, the district recorded over 208 behavior incidents for these students. These incidents ranged from being disruptive in

class to threatening classmates or teachers. These students missed more than 2,500 days in 2011/12 with an average of more than 30 days each. On average JCPS children in foster care have three changes in placement each year.

Description of Project Partners. The Kent School of Social Work was founded in 1918 and for almost 100 years has maintained a close working relationship with the practice community and the region's human service needs. The school offers PhD, MSSW, and BSW degrees and was the first in the country to establish and offer an accredited Marriage and Family Therapy certification in addition to the Master's degree in Social Work. The Kent School has helped to deliver training as a part of the statewide Training Consortium since the early 1980's and has evaluated Kentucky's child welfare training since 1992. Since 1999 faculty at the school have consulted nationally as well as conducting federally funded research and training on child welfare, health, mental health, gerontology, substance abuse issues.

The *Department for Community Based Services* (of the Cabinet for Health and Family Services). DCBS services are administered through a network of nine service regions (Jefferson is the largest one) and offices in each of Kentucky's 120 counties. In addition, DCBS uses a network of contract officials to deliver services, such as child care. The provision of services is enhanced through a close relationship and coordination with local community partners (http://chfs.ky.gov/dcbs).

Jefferson County Public Schools (JCPS), the largest urban school district in Kentucky (Louisville) and the 29th largest district in the nation, will enroll more 100,000 students for the 2012–2013 school years. Demographics break down as 35 percent students are African American, 52 percent are white, 5 percent are Hispanic, and 8 percent are other ethnic minorities.

Furthermore, 13,191 students receive exceptional child education (ECE) services and 5,400 are limited English proficient. Sixty-two percent qualify for free/reduced lunches.

The Jefferson Family Courts of Kentucky operate according to a number of best practice principles set forth by previous Department of Justice initiatives¹. These best practice principles include 1) ongoing training for judges in legal and behavioral science topics such as interpersonal violence by local and national experts; 2) collaboration with key community organizations to provide appropriate service referrals and advocacy when applicable²; and 3) empirically-based education programs to address a range of family issues, including divorce, fatherhood and child support issues, timely adoption of children, and many others.

Family & Children's Place (FCP) is a non-profit family service agency whose mission is to strengthen our community through research based services that heal the trauma of abuse, violence, and neglect and promote safe, healthy and stable families. It is governed by a voluntary board of directors and accredited by the National Association for the Education of Young Children, Council on Accreditation and National Children's Alliance. Services are targeted towards families with children, especially families with few resources that are affected by violence, abuse/neglect, substance abuse and mental illness.

B. Overview of the Program Model

Project goals, activities/interventions and outcomes. The project had the overall goal of increasing academic stability and success of foster youth in 6th through 8th grade at risk for dropping out of school in Metro Louisville, Jefferson County, Kentucky. The objectives and activities associated with this overall goal were as follows: Objective A: Identify local

¹ For example, each of these elements have been identified as part a best practice court-based model in New York called the Youthful Offender Domestic Violence Court funded by the National Institute of Justice. This best practice model includes the ² Collaborating agencies include local domestic violence shelter, public school system, child welfare agency, county attorney and public defender offices, the University of Louisville, CASA, and others.

infrastructure and service needs to promote academic stability and success among foster youth in middle school. In order to increase academic stability and success of foster youth, it was necessary to first assess strengths and barriers related to organizational policies, practices, and interagency coordination which are related to the ability to meet the educational needs of youth in care. This was accomplished by several specific tasks including 1) assembling project team, 2) securing IRB approval to conduct process and outcome evaluation, 3) reviewing goals of project with project team and partners, 4) conducting surveys/focus groups with foster youth and key stakeholders, 5) setting up a program steering committee (PSC), and 6) setting up workgroups under the leadership of the PSC to review and make recommendations about addressing barriers to academic stability and success. Objective B. Develop/Establish a new infrastructure - Pathway for Academic Stability and Success (PASS). Driven by a thorough review of promising strategies in the literature, and the local assessment conducted, an evidenceinformed approach to structured collaboration was developed and vetted by partnering agencies. Concurrently, training was needed to prepare foster parents, professionals and youth to embrace the established approach and the rationale supporting it. This was accomplished by 1) reviewing existing policies and procedures within and across systems of care, 2) fostering/strengthening coalitions and networks through coalition meetings to strengthen cross-system communications and information exchange, data sharing/exchange plan, 3) educating foster parents, teachers and other professionals on foster youth achieving stability and success in school, 4) educating foster youth for academic stability and success, 5) identifying, reviewing, changing (if necessary) practices including the use of screening protocols/checklists for referral sources, assessment procedures, intervention, case management services, and monitoring and tracking foster youth's academic progress and school record across systems of care for educational stability and success,

and 6) identifying indicators of academic stability and success. Objective C. Implement the new collaborative infrastructure-Pathway for Academic Stability and Success (PASS). Once buy-in was obtained from all partnering organizations, the new process was implemented. The tasks accomplished were 1) establishing School Success Navigators for each foster youth, 2) screening, assessing, and providing services to bring about academic stability and success, 3) linking the youth to related services as needed, 4) monitoring youth's progress, evaluating and modifying (when necessary) school stability and success plan, and 6) providing feedback to PSC and workgroups areas of concern as it related to tasks in Objective B for review and modification. Objective D. Evaluate the effectiveness of the new infrastructure- Pathway for Academic Stability and Success (PASS). Evaluation methodology was designed to begin collecting process and outcome data at baseline and throughout, to enable the project to inform the field. This was accomplished by 1) getting the necessary IRB approvals for collecting data, 2) collecting baseline/pretest/posttest data, and 3) performing data entry and appropriate data analysis to answer research questions. Objective. E. Refine/revise the PASS approach based on implementation experience and formative and summative evaluation findings. A continuous quality improvement approach driven by evaluation results enabled adjustments of strategy to promote optimal outcomes. This was accomplished by 1) presenting process and outcome findings to Program Steering Committee (PSC) and workgroups and reviewing/modifying PASS approach as necessary, and 2) producing final program implementation manual. *Objective F.* Disseminate lessons learned, relevant findings, and best practices. A number of program steering committee meetings focused on dissemination and activities conducted and ongoing include 1) providing reports for funding agency as required, 2) preparing and making presentations, and 3) preparing papers for publications to relevant peer-reviewed journals.

Project Logic Model. The *inputs* are the federal funding received, resources of the University and program partners (Department for Community Based Services (DCBS), Jefferson County Public Schools, Jefferson County Family Court, Family & Children's Place). The activities consisted of those interventions being tested as they relate to the need to improve educational stability and success, such as the infrastructure development, training and education. Specific examples include conducting focus groups & interviews with youth, stakeholders, setting up workgroups to review existing policies, procedures, & practices, setting up Student Academic Stability & Success Navigator program, educating foster youth and families on student success, and gathering process and outcome data. The *outputs* consist of products and enumeration of activities, such as the number of people trained, and number of youth whose educational plan was reviewed and/or revised. Examples of this include a signed MOU for sharing of data, regular ongoing meetings with program partners, providing education/training about foster youth's educational needs to foster parents, educators, state child welfare workers, and representatives of Private Child Care (PCC) facilities, screening youth referred to PASS, and serving youth in some capacity through project services. The *outcomes* consist of short-term, medium, and long -term results associated with the interventions. Short term outcomes primarily consist of knowledge and skills gained, medium term outcomes consist of change in quality with regards to practices associated with responding to the needs of youth and long term outcomes consist of increases in safety/security, educational stability/permanency, and well-being of foster youth. In regards to outcomes, for instance, youth referred and participating in the PASS project had lower percent of school attendance, lower percentage of suspensions, and slightly lower percentage of 2+ suspensions compared to youth who had not been involved in the project (see Appendix for the PASS Project Logic Model).

Functioning of the collaborative/partnership. An identified need to incorporate a crosssystem collaboration was imperative to this project as no one agency has the resources or expertise to provide the services and supports required to address the unmet educational needs of foster care children (Zetlin, Weinberg, & Shea, 2006). In Kentucky, there is the recognition for interagency collaboration for the educational success of youth in foster care, yet at the local level - specific to Jefferson County - interagency collaboration around foster youth's educational stability and success was slow to being realized to have any real impact when this project began. Confidentiality policies and lack of data-sharing inhibited communication and collaborative response to the educational needs of many foster youth. Our Program Steering Committee (PSC) attempted to break this cycle by (a) establishing policies and procedures within and across systems of care, (b) strengthening cross-system communications, information exchange, and data sharing/exchange plan, and establishing a protocol for monitoring and tracking foster youth's academic progress and school record, (c) training/ educating foster youth, foster parents, teachers and providers on foster youth's education needs and achieving stability and success in school (d) identifying, reviewed, changed (if necessary) practices including developing screening protocols/checklist for referral sources, implement appropriate assessment, intervention, case management services (e) Identify indicators of academic stability and success. The PSC met monthly for one to two hours to provide updates, feedback, report back from the Educational Navigators on student successes and barriers for problem-solving from the larger team, and to outline progress on community actions (e.g. changing court language, trainings completed, etc).

The PSC rotated its meeting place so that each project partner had the opportunity to host at least a couple of the monthly meetings. As the number of individuals representing each

project partner grew, the PSC eventually settled at Family and Children's Place for its regular meetings due to it being able to accommodate the larger size of the PSC.

Between the monthly meetings, work/task groups made up of representatives from each of the project partners met to work on specific objectives of the project and/or problem solve issues identified in the larger PSC meeting. Recommendations/solutions from the task/work group were then brought to the PSC for discussion and action.

C. Overview of Evaluation

Evaluation (research) design, data collection procedures and the data analysis plan. The evaluation combined both quantitative methods (survey research and chart file review), as well as qualitative methods (focus groups and interviews). The evaluation included 1) needs assessment; 2) process evaluation; 3) training evaluation; and 4) outcomes evaluation.

Needs Assessment. At the start of the project, the University-based team completed a needs assessment by conducting focus groups with key stakeholders about barriers to and strategies for achieving educational stability. These key stakeholders included foster youth, teachers, school personnel, foster parents, and caseworkers. These focus groups and interviews addressed topics such as stigma and discrimination associated with "being" a foster youth; lack of connectedness to school, placement instability and concomitant school disruption, lack of availability as well as appropriateness of education interventions, being in systems that lack a method for tracking their academic progress and portability of their school records, lacking and/or inconsistent monitoring, accountability, and advocacy for youth's educational plan. The project team conducted focus groups with approximately 25-30 key stakeholders. Focus groups were audio or video-recorded following consent by participants. Live note taking was used to

enhance facilitation. Transcripts of these focus groups were completed. Data collected from these focus groups were run through qualitative analysis procedures using a grounded theory approach to identify key themes to be used for future project purposes.

Process Evaluation. Two key elements were assessed through the process evaluation: infrastructure building and intervention implementation. Infrastructure building focused on the extent to which policies and procedures are developed, coalitions and networks are added, and communication/coordination/collaboration are enhanced through the infrastructure building activities of the grant. Intervention implementation centered around the extent to which the best practices identified and trained for the Student Academic Stability & Success Navigator Program are followed by interventionists in this project.

Infrastructure Building. Initially a review was conducted on existing policies, procedures, & practices, educational services & interventions, coalitions and networks, tracking systems, data sharing, training, monitoring, accountability, and evaluating stability & success. This chart file review identified best practices and gaps in the existing service delivery system to be the focus of the PSC and work groups. A follow-up review was completed at the end of the project to determine the extent to which policies/procedures, etc changed as a result of the project.

Interviews were conducted with 10 key informants at the end of the project period that assessed the extent to which participants felt engaged in the process, perceptions of systems change, and recommendations for future directions. Participants also completed ratings of team collaboration and collaborative communication (Collaborative Communication Scale, which assesses various dimensions of communication including communication frequency, reciprocal feedback, formality, and rationality; Joshi, 2009).

Intervention Implementation. This involved an evaluation of the extent to which professionals who administer the Student Academic Stability & Success Navigator program followed the established protocols. Their compliance with the protocol was evaluated through indepth interviews with navigators to see if they followed the key elements of the model such as the completion of educational assessments (strengths and weaknesses), development of appropriate educational plans, enrollment of youth in appropriate educational programs, referral to and provision of appropriate mental health/health/social services related to educational success, the management of school records and other forms of data sharing, participation in collaborative team meetings, etc. We also reviewed the case files to see their documentation of their actions on behalf of the foster youth.

Training Evaluation. Training was provided to professionals, foster youth and families. Sixty-five youth and foster parents received training on factors related to academic success. 144 teachers, mental health providers, child welfare workers and other relevant professionals involved in the youth's life received training on issues related to foster youth and academic success.

Outcomes Evaluation. We gathered data from the Department for Community Based Services (DCBS) and Jefferson County Public Schools on the youth who participated in the program. The DCBS case record was used to assess school stability by documenting whether education issues were identified in the case record. Data was gathered from the school system on academic outcomes such as improvements in school performance as evidenced by grades, test scores, and other indicators of academic achievement. Also, data was collected from youth by the Educational Navigators at baseline. Follow-up data was difficult to gather because youth left care to return home or were placed elsewhare and they could not be followed up to gather post

data. The data gathered at baseline included: demographics (gender, race/ethnicity), academic information (current grade, grades, level of academic performance as well as history of academic performance), well-Being (via Behavioral and Emotional Rating Scale-2nd Edition for middle and high school age children (Lou, Anthony, Stone, Vu, & Austin, 2008), connectedness (via School Engagement Scale, Fredericks et al., 2005). The School Engagement Scale is a student self-report measure that assesses three components of engagement: 1) Behavioral Engagement (Students are asked if they follow school rules, complete their work, pay attention in class, etc.); Emotional Engagement (Students are asked if they like being at school, are excited about their work, are bored at school, etc.); Cognitive Engagement: Students are asked if they spend time out of class on schoolwork, how thoroughly they complete schoolwork, and if they devote extra time and effort to enrichment activities that relate to what they are working on in class. Self-esteem was measured by the 10-item Rosenberg Self-Esteem Scale with items answered on a four point scale - from strongly agree to strongly disagree regarding positive and negative views of self.

Challenges/barriers encountered in the implementation of the evaluation plan. The major challenge in implementing the evaluation plan was that there was no central location or common database source to which to reference or gather the necessary background data for this project, especially background information on the child, school and academic performance information such as grades and test scores, etc. Second, even with a data sharing agreement between all the project partners, and approval for conducting evaluation from the various IRBs (university as well as agencies), getting access to case files was not always easy. Third, case files did not always contain information on the youth's school and academic performance.

Lastly, because of frequent and sudden placement changes, gathering any sort of post data was difficult.

III. Project Implementation

A. Infrastructure Assessment & Policy/Program Review

Our first objective was to identify local infrastructure and service needs to promote academic stability and success among foster youth in middle school. In order to this, we assembled the project team, reviewed the project goals and objectives with project team and partners, secured IRB approval, and conducted surveys/focus groups with foster youth and key stakeholders, and established the program steering committee (PSC).

The project team was represented by all the key project partners (University of Louisville, Family Court, Department of Community Based Services, Jefferson County Public Schools, Family and Children's Place) (see Appendix).

We conducted seven focus groups. They were with foster youth and key stakeholders. Two were conducted with public school personnel including school counselors, Youth Service Center Coordinators, and Directors of Pupil Personnel; one with child welfare case workers; one with middle school foster youth; one with birth parents; one with foster parents; and one with family court judges and attorneys). On average each focus group consisted of 4- 12 participants with a total of 58 participants. Focus groups were facilitated by member of the project team and were audio recorded. Live note taking was used to enhance facilitation. Transcripts were analyzed using a grounded theory approach to identify key themes and to guide our work. We identified 10 key themes to inform our implementation activities (see Appendix for supporting data). These were:

Theme 1: There is an unawareness of which youth are in foster care in the school unless told by the foster parent or caseworker (YSC, ADPP, DCBS, Foster Parent, Foster Youth).

Subtheme 1: However, for foster youth, this is a positive because they don't like to be known as a foster child (Foster Youth).

<u>Theme 2:</u> Confusion around Confidentiality (YSC, Foster Parent, Foster Youth).

<u>Theme 3:</u> There is confusion around educational rights and policies across all systems (YSC, DCBS, Foster Parent).

<u>Theme 4:</u> Lack of communication between all parties (YSC, ADPP, DCBS, Foster Parent, Foster Youth).

<u>Theme 5:</u> Lack of Cross-System Collaboration around foster youth and their educational stability (YSC, ADPP, DCBS, Foster Parent)

<u>Theme 6:</u> Teachers are not always aware, but informing teachers is not always the best idea. (YSC, DCBS, Foster Parent, Foster Youth). <u>Sub Theme 6:</u> Foster Youth/Negative Perception of teachers:

Theme 7: Quality of foster parents can be an issue (YSC, ADPP, DCBS). <u>Sub Theme 7:</u>
Yet the foster parents are not often informed about the educational needs of their foster youth yet they are expected to advocate for their foster youth (Foster Parent).

<u>Theme 8:</u> Strategies/Services that have worked well (YSC, ADPP, DCBS, Foster Parent)

Theme 9: Training Recommendations (YSC, ADPP, DCBS, Foster Parent, Foster Youth)

Neither teachers nor Foster Parents are required to have training around abuse and neglect, trauma, or educational policies (ECE, etc.).

<u>Theme 10:</u> Overall Recommendations for the PASS Demonstration Grant to increase educational stability (YSC, DCBS, Foster Parent)

Next, we conducted a review of existing policies and procedures across educational, child welfare, judicial and mental health systems in order to make recommendations to modify existing procedures/practice In addition, we examined transcripts gathered from focus groups in regards to collaborative practice, including data sharing needs, cross-system communications and coordination as well as identified training needs. We identified three changes that would significantly improve the attention placed on educational needs of foster youth. These were data sharing across systems of care, an educational review and assessment of the foster child or youth ordered at the time of the temporary removal hearing, and making accessible to child welfare workers and foster care providers critical components of the child's educational records at the time the child was placed in foster care. As a result of these suggested changes:

- 1) A legal data sharing agreement between project partners was created and used for the purposes of this project with the goal that it would be the basis for ongoing data sharing and communication beyond the duration of the project.
- 2) The Child Welfare System, Department of Community Based Services (DCBS), proposed changes to their System of Practice (SOP) around the educational stability of foster children and youth; In the end, this resulted in the adoption of the suggested Educational PASSport (see Appendix), which is a revision and modification of information typically gathered by DCBS workers on the child's educational status as part of the assessment and case planning process. This revised PASSport can be easily shared with foster parents and schools. This revised PASSport not only provides information about attendance, GPA, state assessments and the like, but provides information about how the youth learns and who they connect with (more of a qualitative assessment of the youth in the school setting in regards to their educational status and progress).

- 3) The head Jefferson Family Court judge were amenable to amending the court order at the temporary removal hearing (TRH) to include a review of the child's educational progress and to give child welfare and foster parents a role in asking for review of a child's academic status/progress for a child in their care.
- 4) The School system began to track the number of foster children and youth attending the public schools in Jefferson County through their pupil tracking system which had not previously occurred at all.

Contextual factors. The court liaison who worked with us on this project retired in the middle of implementing this project and the position which he occupied was eliminated and not funded to continue. His replacement was not able to consistently attend our meetings and follow through with tracking the progress of adoption of the Addendum to Temporary Custody Order, partly due to taking on the responsibilities of the retired court liaison in addition to their existing workload. Additionally, there was a change in leadership and composition of the Family Court due to retirements and election of new judges that further slowed progress of adoption of the Addendum to Temporary Custody Order. As of the end of the project, the statewide adoption and use of the Addendum to Temporary Custody order had not occurred and more education was needed to publicize this change with caseworkers, court and school personnel.

Challenges and Barriers. A major challenge was the execution of these agreements. Despite having a data sharing agreement, obtaining educational data did not go as smoothly as planned due to various complications with accessing the different database systems used by the educational system and other program partners. Another area that required finesse was getting referrals from DCBS for foster youth in middle school due to lack of timely communication with Navigators about being present at the 5-day conference after the temporary removal to plan for

the child's care for or any initial court hearings. Although we initially made presentations to the various adolescent teams (foster, adoption, independent living) at the child welfare agency early on in the Project, many of the workers seemed unfamiliar with the PASS project and did not follow through when contacted by the Navigators. There also seemed to be a perception that the project created more work for caseworkers when in fact the Navigators could provide a great deal of assistance on their cases especially in regards to addressing educational needs. Keeping the lines of communication open and the sharing of information flowing was a task that required constant attention

Lessons learned. Policy and programmatic changes take time to be not only implemented but to be accepted. Because of the unavoidable changes in personnel (i.e. retirements, changing jobs), existing mandates, and competing demands on workers' time, there needed to be ongoing and repeated education and training of the workforce to keep the awareness about programmatic changes in the forefront to meet the educational needs of children and youth in foster care.

B. Training

Our initial focus groups with key stakeholders revealed that training was needed to bring awareness about not only the educational needs of children and youth in foster care, but about the process and experience of being placed in care and the lasting psychosocial impacts on the youth. We developed a training program to educate key stakeholders (i.e. foster parents, teachers and other professionals, foster children and youth) on foster youth achieving educational stability and success. This training program was tailored to meet the needs of the particular key stakeholder group. For instance, with child welfare workers and school personnel, we identified and reviewed new and changing policies (i.e. Uninterrupted Scholars Act, FERPA). We

researched and reviewed literature related to evidence-based and promising practices on educational engagement, stability, and success. We received permission to use materials from existing trainings (Endless Dreams by the Casey Family Foundation and Advocating for the Educational Needs of Children in Out-of-Home Care: Training Curriculum for Foster Parents (author: Helen Ward)) in developing our training curriculum, which we customized for our key stakeholders.

The training curriculum for child welfare workers consisted on the following topics: understanding the possible emotional, behavioral, social, and intellectual academic impact on youth in foster care (e.g. attachment issues, acting out behaviors, disabilities, etc.) through a developmental perspective. Since many of the foster youth were being cared for by private child care, we reached out to a number of private child care agencies and trained them in the following areas: 1) advocating for their foster youth with the various stakeholders (e.g. school, child welfare, family court); 2) the importance of documentation; 3) compassion fatigue, burnout, and secondary trauma; and 4) self-care.

The training curriculum for foster parents included the following topics: 1) prevalence of disabilities and education problems among children in care; (2) school outcomes of children in care; (3) factors that contribute to success in school; (4) special education; and (5) interacting effectively with schools.

The training curriculum for school employees (School Family Resource and Youth Service Center Coordinators) consisted of 1) general information about youth in foster care and their educational issues; 2) the possible emotional, behavioral, social, and intellectual academic impact on youth in foster care and strategies for responding to these impacts; and supporting the youth's successful educational experience in the classroom and at the school building as well as

trained on the struggles youth in out-of-home care face in school, the legislation supporting foster youth's right to educational stability, trauma effects and triggers and how trauma plays a role on childhood development, how to effectively partner with community agencies and tips for working with traumatized youth in the school and in the classroom, and self-care.

With foster youth, we utilized both didactic and experiential training strategies. We provided a classroom setting educational program we developed called, "Smart Talk . . . Talk Smart" focusing on building healthy relationships and positive communication skills (adapted from Markman & Stanley's healthy relationship education program, PREP. http://www.prepinc.com). We also implemented a program where our Educational Navigators invited the foster youth they were working with to spend a day at the University of Louisville where they were provided with skills for recognizing and managing emotions, the opportunity to see that they are not alone in their journey through foster care, and emphasis on future goals such as attending college.

In total, we had six training events during the course of the project. We trained 43 foster parents (37 completed training evaluations), 14 foster children (7 provided feedback), 40 child welfare workers (27 completed training evaluations), 35 neighborhood place caseworkers (35 completed training evaluations), and 80 educators/school personnel (56 completed training evaluations). We collected demographic information, assessed knowledge, self-efficacy and satisfaction with the trainings. Overall, the trainings were well received and found to be useful to participants (see Appendix).

There were very few challenges faced in implementing trainings. The major obstacle faced was time and scheduling trainings that fit with availability of the key stakeholders. Our

trainings competed with other training requirements that key stakeholders had to meet in addition to what we were offering.

C. Services.

We implemented - Pathway for Academic Stability and Success (PASS) service delivery model- to ensure that the educational needs of foster children and youth were being addressed. We established School Success Navigators for each foster youth, screened, assessed and provided services to bring about academic stability and success, linked the youth to related services as needed, monitored the youths' progress, evaluated and modified (when necessary) their school stability and success plan, and provided feedback to the project steering committee and workgroups areas of concern for review and modification.

Referrals were received from the child welfare system as soon as the youth entered care with the goal of the youth being connected to PASS at the 5-day temporary hearing or soon thereafter. At the 5-day hearing, Family Court would order an educational review as well. However, receiving referrals was a challenge. PASS navigators were not always notified of the 5-day hearing or sent referrals. Of referrals received, many of the foster youth would be placed outside of the region, making it difficult to serve them. Educational navigators at times were unable to obtain school records, connect with child welfare workers in a timely manner, all of which delayed taking action. It required some finesse is getting referrals from social services for foster youth in middle school due to frequent personnel changes at the social service agency, resulting in fewer referrals. Navigators had to repeat the process of educating referral sources about the project in hopes of obtaining more referrals. They also had to deal with placement disruptions, an unfortunate reality faced everyday in child welfare services.

As part of the assessment process, navigators gathered data on the youth's academic record as well as psychosocial functioning through administration of the following standardized measures: (1) Behavior Rating Index for Children; (2) School Engagement Scale; (3) The Child PTSD Symptom Scale (CPSS) Part 1 and Part 2; (4) Rosenberg Self-Esteem Scale; and (5) The Trauma Symptom Checklist-A. We also trained the Navigators to use the Learning and Study Strategies Inventory for High School students (LASSI-HS). We adapted the measure and recalculated the scores to use this instrument with middle school students. This was used to help rate youth in ten areas that influence academic performance: Attitude, Motivation, Time Management, Anxiety, Concentration, Information Processing, Selecting Main Ideas, Study Aids, Self-Testing and Test Strategies. Any area where a youth scored 25% or less, he or she was given tip sheets (developed by the project team) on ways to improve performance in that area.

The table below lists the categories and specific data points that were reviewed and incorporated into the assessment and service planning for each foster youth.

Data points reviewed by navigators as part of educational assessment and planning

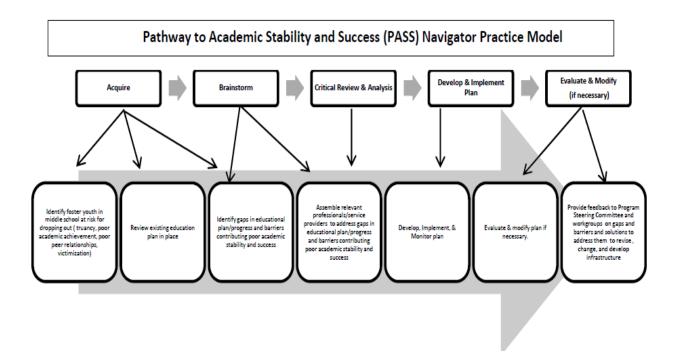
	School Name in June 2013						
School	School Name for Current Year:						
	# of Schools attended in previous school year						
	# of Schools attended in the 2013-2014 school year:						
	Date of Last School Move:						
Grade level	Grade Level for Current School Year:						
	Was the Youth in the Correct Grade Level (Y/N):						
	Grade Point Average:						
	Total Number of Absences:						
Attendance, Truancy, &	Was the Youth Truant (Y/N):						
Suspensions	Number of Times Truant:						
	Number of Disciplinary Referrals:						
	Number of In-School Suspensions:						
	Number of Out of School Suspensions:						
ESL status	Is the Youth Classified as English Language Learner (ELL) Status						
	(Y/N):						

IEP status	Is the Youth Classified as having Individualized Education Program Status (Y/N):				
Subject Test					
J	l · · ·				
Performance	Math Assessment Proficiency:				
	EXPLORE Composite Score:				
Career Goals	Future Academic Goals:				
	Future Career Goals:				
Demographics	Race, Gender, Age,				
Current Family	Primary relationships with friends or family:				
Relationship	1=Intact and Meaningful; 2=Problematic; 3=Lack of Connection				
	and Support				
Social Environment	1=Well Connected and Utilizes Support;				
	2=Has Been Connected to Support and Willing to Reconnect;				
	3=Under-connected and Isolated				
Strengths	Identify strengths that have helped client/family cope and reduce				
Sirensins	dilemma:				
	History of Emotional Stability: I=Yes; 2=No				
	Positive Coping Skills: 1=Yes; 2=No				
	Reaching Out to Others: $1=Yes$; $2=No$				
	Use of Leisure/Hobbies: I=Yes; 2=No				
	Sense of Hope: $1=Yes$; $2=No$				
	Sense of Humor: 1=Yes; 2=No				
	Journaling: 1=Yes; 2=No				
	Reflection/Meditation: 1=Yes; 2=No				
	History of Employment: 1=Yes; 2=No				
	Religion/Spirituality: $1=Yes$; $2=No$				
	Exercising: $I=Yes$; $2=No$				
	Other, Specify: 1=Yes; 2=No				
	If YES,				
Current Risk Assessment	Suicide: 1=Ideation; 2=Intent; 3=Access to Means; 4=Threats;				
	5=Acts; 6=Reported; 7=N/A				
	Self-Injurious Behavior: 1=Threats; 2=Acts; 3=Reported; 4=N/A				
	Physical Violence towards Others: 1=Ideation; 2=Intent; 3=Access				
	to Means; 4=Threats; 5=Acts; 6=Reported; 7=N/A				
	Medical/Physical Risk (high risk client behavior, including non-				
	substance addictions): $l=Ideation$; $2=Threats$; $3=Acts$;				
	4=Reported; 5 =N/A				
	Sexual Abuse: 1=Acts; 2=Reported; 3=N/A				
	Victim of DV/Child Witness: 1=Acts; 2=Reported; 3=N/A				
	Impaired Judgment: I=Mild; 2=Moderate; 3=Severe; 4=N/A				
	Hopelessness: $I=Mild$; $2=Moderate$; $3=Severe$; $4=N/A$				
	_				
	<u>Lack of Support:</u> 1=Mild; 2=Moderate; 3 =Severe; 4=N/A				

Self-Injury/ Violence/maltreatment/	Recent Loss: 1=Mild; 2=Moderate; 3 =Severe; 4=N/A Housing Crisis: 1=Mild; 2=Moderate; 3 =Severe; 4=N/A: Social Isolation: 1=Mild; 2=Moderate; 3 =Severe; 4=N/A Inadequate Financial Resources: 1=Mild; 2=Moderate; 3 =Severe; 4=N/A; Other: Alcohol and Substance Abuse: 1=Never; 2=Seldom; 3=Occasionally; 4=Frequently; 5=Daily/ Please specify type of substance: Legal Issues (such as court referred, custody, DUI): 1=Yes; 2=No Family History of suicide/violence: 1=Yes; 2=No; 3=N/A				
victimization History	CD Family History: 1=Yes; 2=No; 3=N/A Previous MH/SA Hospitalization: 1=Yes; 2=No; 3=N/A An Adult Reported History of Childhood Sexual Abuse: 1=Yes; 2=No; 3=N/A History of Sexual Assault: 1=Yes; 2=No; 3=N/A				
Agency Service Plan Success Factors	Barriers to Goal Attainment: Severity of problem 1=Yes; 2=No Health Issues 1=Yes; 2=No Scheduling Conflicts 1=Yes; 2=No Transportation/Financial Difficulties1=Yes; 2=No Work Barriers 1=Yes; 2=No Other 1=Yes; 2=No; If YES, specify Process Goal: Measureable, observable step toward goal: Referrals made: 1=none, 2=yes, please specify				
Overall Behavioral Functioning	Behavior Rating Index for Children (BRIC) score				
School Engagement	Behavioral Engagement Scale score Emotional Engagement Scale score Cognitive Engagement Scale score				
Post-Traumatic Stress Symptoms	Child PTSD Symptom Scale (CPSS) Part 1 score Child PTSD Symptom Scale (CPSS) Part 2 score Trauma System Checklist for Children- Alternative scale score				
Self-Esteem	Rosenberg Self-Esteem Scale score				
Child Welfare Agency Assessment (Continuous Quality Improvement- CQA)	Reason for Referral to DCBS: Presenting Problems/Concerns: Family Background and Relationships: Developmental History: School/Academic History: Social Friendships, Networks, and Resources:				

Social Services Delivery Assessment, Goals, Objectives, Outcomes,
and Accomplishments:

After screening and assessing, the Navigators linked foster youth with appropriate educational services and related psychosocial services (as needed), tracked and monitored their educational progress and school stability and success, and provided feedback to the project steering committee and workgroups for review. They applied the following steps as stated in the diagram below.



The Navigators worked with the youth in providing the following: (1) advocacy especially for youth to remain in their school; (2) rapport building including helping youth access adults in the school building they can trust and build relationships with as well as connecting school personnel with child welfare personnel; (3) school and home visits; (4) family court appearances; and (5) connecting youth to resources to improve their educational success.

The Navigators identified gaps and barriers contributing to poor academic stability and success and assisted the youth and families in overcoming these by linking them to appropriate educational and psychosocial services. As stated above, there were challenges to doing this successfully as the Navigators faced a lack of response from child welfare workers and school personnel at times due to a variety of reasons, chief among them having too much on their plate to follow through with the Navigators' request. As a result, some foster parents were resistant to interact with the Navigators because it had not been communicated to them that an Educational Navigator had been assigned to their foster youth.

Navigators carried out the monitoring function by checking in with workers, foster parents, and foster youth as well school personnel. Foster parents became more receptive to working with the Navigators as a result of reaching out to them to share their ideas for increasing academic stability and success for the student. Below is an example of how navigators built rapport and were able to support educational stability with one foster youth.

One student struggling with behavior issues and a .02 GPA was suspended to the Board for fighting. This student then needed a Board Meeting in order to re-enter school. When the board meeting was initially scheduled, only the Navigator and the Foster Parent showed for it-without all the necessary parties, the meeting could not occur. This particular student had recently changed foster homes and had been out of school two weeks prior to being suspended due to inefficiency of transferring records. An issue arose where multiple parties missed three scheduled Board meetings, thus the student was not eligible to return to school – adding to the time away from school by another week. This was further complicated by a change in the child welfare worker assigned to the case, a change without the Navigator or Foster Parent knowing who the new worker was, resulting in delays in scheduling of a new meeting and the student getting back to academics. The lack of communication was a major obstacle in helping this student experience any success in school.

Due to the Navigator's persistence with the foster parent, DCBS and JCPS she was able to work to bring light to this situation and with the help of a Steering Committee member, was able to get this student back into school without any more delay. It's not always easy to bridge the systems, but the role of the Navigator is one that links all systems together for the benefit of the youth.

The educational navigators reported to the PSC each meeting and described the number of clients they were seeing, demographics, specifics of cases, successes, and challenges and barriers. The program steering committee (PSC) reviewed the processes and made suggestions on changing or adjusting them.

Youth served represented all racial and ethnic groups, but mostly were Caucasian and African American. They attended a variety of schools within the Jefferson County Public School System (see Appendix). The navigators' work with the youth was fluid and the plan to keep youth successful and stable in school changed due to external circumstances such as a change in placement, change in school, and a return to home. An integral part of the PASS Navigator Practice Model was to continually evaluate how the youth are doing and change the plan accordingly.

The navigators carried out the monitoring function by checking in with state workers, caseworkers, foster parents, and foster youth as well school personnel. Below is an example of how navigators were able to support educational stability with one foster youth through monitoring.

One student who is diagnosed with MMR (Mild Mental Retardation) has an IEP which requires her to have a scribe in class, a reader and no homework – to name a few considerations. Although this was set in place due to her disability, these services were not being met until navigators talked with the school. Although it was a struggle for these services to be put into place last school year – it did happen and the student had a successful year. Once the school year started for 2014-2015 these services were once again absent. Due to the connections and positive rapport navigators made at the school last year, one phone call to the school was all it took in order for these services to be implemented once again.

Not all professionals involved in the youth's life were fully convinced and aware of how the Navigators could assist rather than hinder their work with youth. On further exploration about this barrier, we learned that there was a perception that this project created more work for project partners, rather than the fact that the Navigators could provide a great deal of assistance to caseworkers and school personnel, especially in regards to problem solving youth's educational issues. A second perception that surfaced was that some worried that by having the Navigators involved would bring additional scrutiny of their work.

IV. Project Evaluation

We gathered process and outcome data at baseline and throughout, to enable the project to inform the field. This was accomplished by: 1) getting the necessary IRB approvals for collecting data, 2) collecting baseline/pretest/posttest data, and 3) performing data entry and appropriate data analysis to evaluate program implementation and impact. *Process Evaluation*. This involved evaluating infrastructure building which focused on the extent to which policies procedures coalitions and and developed, and networks added. are are communication/coordination/collaboration are enhanced. Intervention implementation evaluation centered around the extent to which the PASS Program was followed by interventionists/navigators in this project. Interviews were conducted with key stakeholders at the end of the project period which assessed the extent to which participants felt engaged in the process, perceptions of systems change, and recommendations for future directions. Participants also completed ratings of team collaboration and collaborative communication. *Intervention* implementation evaluation. This involved an evaluation of the extent to which professionals who administer the Student Academic Stability & Success Navigator program follow the established protocols. Training Evaluation. Training was provided to professionals, foster youth and families and pre and posttest data was gathered on knowledge, satisfaction, likelihood of using the information, etc. Outcomes Evaluation. We gathered data from the Department for

Community Based Services (DCBS) and Jefferson County Public Schools on the youth who participated in the program. The DCBS case record was used to assess school stability by documenting whether education issues were identified in the case record. Data was gathered from the school system on academic outcomes such as improvements in school performance as evidenced by grades, test scores, and other indicators of academic achievement. Also, data was collected from youth by the Educational Navigators at baseline. Follow-up data was difficult to gather because youth left care to return home or were placed elsewhere and could not be followed up with to gather post data.

Profile of foster youth served by PASS. We examined assessment data (and some available post program data) of 39 foster youth who had participated in PASS. They were African American (59%), Caucasian (33%), or of some other race/ethnicity (8%). They were made up of both boys (59%) and girls (41%) and on average were 13 years of age. Nearly 90% of these PASS participants were in the correct grade level, with an average GPA of 2.18 (C average), 3.4% reported being truant, 46.7% had an IEP, the number of different schools attended had increased on average from 1.5 to 1.9 from two years ago, and the average number of disciplinary referrals were 3. Youth in the PASS program reported:

- feeling more unconnected and isolated than their mainstream counterparts, as well as feeling their family relationships were more problematic.
- that their sense of humor as well as their sense of hope were their main areas to find strength. Religion/Spirituality was also highly indicated as a strength for this group as well.

- experiencing multiple risks and were high in legal issues; witnessing domestic violence, medical/physical risks and physical violence toward others were other areas of higher risk.
- impaired judgement,, housing crisis, hopelessness and experiencing recent loss
- that tend to hide their thoughts and feelings from others, may not pay attention, get upset and/or lose their temper (items on the Behavior Rating Index for Children).
- greater school engagement and connectedness at post-test
- to have a decrease in childhood PTSD symptoms after having been involved with PASS.
- to have a slight decrease from pre-test to post-test on self-esteem
- a decrease in trauma symptoms from pre-test to post-test when asked questions such as feeling afraid that something bad might happen, having scary ideas in their heads.

Comparison of PASS participants to foster youth not participating in PASS or youth not in foster care. Youth participating in PASS had a lesser school attendance rate (90%) compared to their district wide counter parts in foster care (94.5%) and youth not in foster care (94.3%). Their suspension from school rate was slightly lower (42%) than foster youth not in PASS (49%). However, these rates were 3 and 4 times more than district wide youth not in foster care (12%). They had almost twice as many absences (16.4) on average compared to the other groups (8.9 and 9.2). They had lesser sense of connectedness compared to their counterparts in regards to "there is at least one adult who says positive things to me frequently", "there is at least one adult they can talk to about their problems" and "feel they belong in their school". Finally, only 6% were evaluated as distinguished on state assessments compared to 20% for foster youth not in PASS and 41% not in foster care. Overall, PASS participants were more vulnerable in number a number of areas of functioning compared to their peers whether in foster care or not.

Implementation evaluation. This involved an evaluation of the extent to which navigators followed the established protocols. Their compliance with the protocol was evaluated through in-depth interviews with navigators and a review of the case files. Overall, the navigators followed the protocol for engaging with foster youth and other service providers. They were not always successful in getting a case conference meeting where all the significant players in the youth's life were present in the same room at the same time. This impacted the quality of the plan able to be developed. The strongest aspect of the implementation was the advocacy that navigators were able to provide which resulted in some meaningful changes for the foster youth.

It was recommended by a navigator ("want more training") and the review from the case files on how activities were documented suggest that it would have been beneficial if more training had been provided on how to use the PASS approach prior to asking them to engage in service delivery. One navigator stated that the ABCDE decision-making guide "did help me concentrate on the information they were looking for in a succinct way". Another stated that they "hated the form", "it was a big headache", and "However, the process that is described in ABCDE, is fine".

A key aspect of the PASS approach that the navigators felt comfortable with was their role as reflected in the statement below.

I was able to step into the role as mentor. I wasn't their caseworker, their therapist. I was just able to be her advocate. It was sometimes hard to explain this role to the child, the foster family, and the school people. But it wasn't hard for me to know my role and my boundaries. I just had to educate others on exactly what my role was as an Educational Navigator. I absolutely LOVED being an Educational Navigator. I could actually meet the kids at school, go to their homes, talked to all involved and be that positive force in their lives. They weren't afraid to talk to me. Actually they may have told me more than if I had been their therapist.

Navigators appreciated the fact that within the PASS approach, there were "multiple layers trying to intervene to help the child". As one navigator noted,

Blessing and a curse to have multiple service providers. Good to have multiple layers trying to intervene to help the child, but when barriers were identified it was like "that is not what we handle"... Having the pass committee meetings was helpful. The heads of some agencies were there and this is where some of those big changes could be addressed. That was a good thing. I am so glad for that layer.

Navigators experienced successes as well as challenges. An example of a success:

[I] Started working with her 2-3 months before she graduated from 8th grade. She identified that she wished she could be a PASS part when she first got into care. School was her focus, she had behavioral problems, and she didn't have anyone. What turned it around for her, she said that when she knew people cared everything changed. She had an asst principal and either a custodian or lunch room person who stayed on her, called her on her stuff, and saw her potential. She ended up giving the 8th grade commencement speech and put a lot of this (her experience) into that speech.

An example of challenges faced by navigators:

There was this one PASS participant who was having many, many behavioral issues. I attended may school suspension hearings with him. He had multiple foster placements due to behavioral issues. As I got to know him, I learned of some massive levels of trauma that he had experienced that no one had told me about or seemed to know about. So I went to a therapy session with his therapist to try to talk one-on-one with the therapist (without him in the room) to explain what I had learned and hopefully it would be addressed in the therapy sessions. The therapist told me that she just couldn't deal with that trauma since the behavior was what was getting him in trouble and that she would be focusing on the behavioral issues only. I told her that I thought that we were seeing the symptoms of this trauma when he picks up a desk—and disrupts placement.

Evaluation of collaboration among project partners. We assessed collaboration during the course of the project. All project partners completed the Wilder Collaboration Scale initially, at midpoint, and end of the project. Overall, our Project Steering Committee (PSC) worked well together. Although our assessment of our collaboration slightly dipped from Time 1 (score

=150) at Time 2 (score=148), we ended up rocketing past the initial opinion of our collaboration at Time 3 (.score= 159).

Interviews with key stakeholders/project partners to assess overall impact of the PASS project. All key stakeholders/project partners were invited to participate in one-on-one interviews with an interviewer who was not involved with the implementation of PASS. Ten individuals representing the various partners participated in the interviews. Each interview lasted from 30 minutes to 1 hour and was audio recorded and then transcribed. The following findings emerged and are presented below (see Appendix for details). In regards to programmatic/policy changes that are needed to support the educational outcomes of youth in foster care successful, stakeholders emphasized the need for leadership across systems of care to break down silos and promote communication through changing practices such as "including school reps in facilitated staffings at removal and placement change", "Foster parents need a way to communicate with school counselors regarding educational needs and the authority to advocate for them", having "Court language and legal information necessary for foster parents to serve as educational representatives", and using "Educational Passport to follow each foster care youth to ensure that the service providers can advocate for them".

Having been involved in PASS and seen its impact, stakeholders identified some specific ways to promote the academic success of youth in care that were advocated in PASS. Examples include "Collaboration and communication between all parties", "Stable placement; early assessment of academic needs; engagement with school staff; mentor, caregiver involvement; focus of long term goals for youth and information and support in reaching goals", and "Consistently – communication with school, foster parent and outside agencies".

Stakeholders also clearly identified barriers to academic success of youth in care.

Barriers identified were "mental health issues, all parties not working in partnership and collaboratively", "lack of knowledge of trauma of removal and moves", and "moving from foster care home to foster care home",

Stakeholders noted that PASS had an impact on them and their agency in specific ways. These included "increased collaborative work with JCPS; increased focus on children in out-of-home-care educational needs; aided in identifying unmet educational needs in our children", "made aware of specific needs of foster children and court order document", "opened our eyes to the multiple areas of concern that foster families encounter in the school system, and "connected foster care students with the homeless office and supports available to these students and their families".

Because of the impact that they had observed and experienced, stakeholders stated that they planned to promote and continue the efforts of PASS into the future. Specifically, they said they would "promote and increase collaborative work with JCPS; increase focus on children in out-of-home-care educational needs; aide in identifying unmet educational needs in our children", "meet with JCPS managers to address issues", Monitoring of foster children through Infinite Campus", and "Continue developing resources for foster care students in Homeless Program; sharing concerns with JCPS's leadership".

Overall, youth survey data shows improvements in areas of trauma and school engagement as well as key areas of strength and risk. Collaboration scores improved over the course of the project suggesting that PASS project partners worked well to accomplish the goals and objectives of PASS. Stakeholder interviews supported the important role of navigators in obtaining/exchanging information and advocating for children. Steering committee qualitative

feedback provides helpful insights into success factors, barriers, additional changes needed, impact of the project and ways to continue/sustain these efforts by various agencies.

V. Conclusions

A review of the implementation and evaluation of PASS lead to the following conclusions:

- Youth coming into foster care have experienced many problems that do not have an
 easy answer that can be easily solved by simply placing them out of their home and
 away from their families.
- Being removed and placed in foster care places youth at a great disadvantage in regards to academic performance and progress. However, it also provides an opportunity for the educational needs of the youth to be identified, highlighted, and addressed.
- The educational needs of foster youth receive less attention by child welfare, schools, and courts than other issues impacting on the youth since these other issues (i.e. physical abuse, sexual abuse, physical and emotional neglect) are more likely to be reported and do require more immediate attention since they more directly effect the physical and psychological wellbeing of the youth. At times, it is assumed (incorrectly) that the academic needs of the youth are being fully met by the school in which the youth is enrolled since he/she comes in contact with teachers and academic counselors on daily or regular basis.
- Having unmet educational needs does not typically result in foster care placement.
 The educational needs and problems of foster youth are typically not reported as a

primary concern, other than instances of educational neglect. Large percentage of youth typically do not come into care because of educational neglect or unmet educational needs. Yet, a large percentage of youth who do come into care due to other forms of maltreatment (physical and sexual abuse, for instance) do have unmet educational needs.

- Although educational assessment of youth who come into care for other forms of
 maltreatment is supposed to be routinely conducted, documented, and incorporated
 into the case plan, it receives cursory attention in actual practice.
- The set of practices associated with removing youth to protect them from maltreatment can be in itself a contributor to not meeting the educational needs of youth. For instance, placement decisions typically do not take into account (and sometimes cannot or are not able to) the importance of placing the youth in a locality that maintains the youth's existing connections to his/her family, neighborhood, school, peers, etc. As a result, the youth end up attending multiple schools while in foster care. They develop mental health conditions from separation anxiety to attachment disorders. They can become alienated from the schools they attend since they are able to form very few relationships with peers and adult school personnel. The schools end up really not knowing them because they do not have a relationship with the youth and in many instances, do not know who they are since the youth do not want to be identified as being in foster care (as we learned from the focus groups with foster youth). School records travel too slowly and do not always travel with the youth, resulting in school personnel usually not having immediate access to the youth's school records at the initial time of placement in the school. Relatedly, foster

- parents get limited information about the youth's academic abilities or problems, yet have to enroll the youth in the local school in the appropriate program.
- Systems of care are not always able to follow existing policies and procedures that could lead to better meeting a youth's educational needs because they (and their staff) are overwhelmed with the volume of the work, employ staff who are not knowledgeable about assessing educational needs of youth, and experience way too frequently staff turnover and lack of resources to adequately respond to foster youths needs, educational or otherwise.
- To fully attend to the educational needs of foster youth, all systems of care involved in the youth's care (child welfare, courts, schools, foster families, health/mental health) need to move away from the "silo" approach to care and engage in intentional collaborative and coordinated care.
- The PASS project was able to demonstrate that the various systems of care do want foster youth to be successful in all areas of their lives, including academics. Although they have to contend with their own bureaucracies, policies and procedures which seem to be at cross purposes at times, these various systems of care can come together to challenge and break barriers and join and work differently by taking some specific actions such as: creating a data sharing agreement to freely exchange educational information and materials, modifying and highlighting existing procedures (i.e. courts requiring educational reviews), and intentionally assessing the educational needs of foster youth when they come into their systems of care (i.e. establish a means by which to know that a foster youth has entered their system and needs to be supported).

- Having a system of educational navigators who can assess educational needs, assist
 foster youth, coach foster parents, coordinate and advocate for resources within and
 across systems of care can be a powerful strategy.
- There is a need for ongoing education and training of professionals involved in the care of foster youth about educational needs of foster youth, state and federal policies that guide confidentiality, accessing and sharing of educational records. Additionally, there is a need to educate professionals about what the experience of foster care is for youth and how that experience impacts not only their psychosocial functioning but also their academic abilities and performance.

VI. Implications of Results and Recommendations

The experience of removal and foster care is traumatic. Schools, Courts, and Child Welfare Agencies should take an active role in educating and empowering foster youth about their educational potential, in addition to providing a safety net and nurturing care when the youth are removed from their families and placed in out of home care.

Systems of care (schools, social services, etc) should review their policies, programs, and practices in order to assess whether they promote meeting needs of foster youth (educational and/or psychosocial) or act as a further barrier to addressing needs, and traumatize the youth through their actions (or inactions). Services should be changed so as to be trauma informed.

There should be ongoing review of practices, not only child welfare practices but practices that take place in schools and in the courts, especially as they relate to meeting the educational needs of foster youth. This could be actively conducted by Citizen Review Panels

(that already exist in many regions of the country) which review other aspects of foster youths' wellbeing and monitor service delivery and advocate for best practices on their behalf.

Meeting the educational needs of foster youth should be a core goal of funders, child welfare policy and program administrators, educators, and family court judges and child advocates. They should work to fully fund educational navigators/advocates/liaisons within the various systems of care to engage in the hard work of coordination, advocacy, assistance and coaching. Within the child welfare system, school system, and the court system, ensuring that the educational needs of foster youth will be met--will not be ever achieved if it is expected that child welfare workers, educators, and court support workers will do this work in addition to all of their other job responsibilities, given the high caseloads and limited number of staff, high turnover, unfunded mandates, and limited funding.

From a best practices perspective, a clear indicator of academic stability and success is early intervention in the process once a child is removed from his/her home. At the very least, an order by the Court at the temporary removal hearing requiring an educational assessment and review would allow for the early screening and detection of educational problems that a youth may be experiencing that was not previously known. This could be reinforced with the requirements for following policies (maintaining connections) to keep the foster youth at their home school, and having their educational records follow them, should they have to change schools, etc.

Professionals, biological and foster parents should receive ongoing education and training on not only their rights and responsibilities to the child in their care but also what they and the child welfare agencies schools, and courts can and are required to do under the law in regards to promoting academic success and stability. Additionally, this information should be included in

the required training for professionals, for becoming foster parents and should be included in any reunification plan developed with biological parents.

Information Technology (IT) from the various systems of care--schools, courts, child welfare agencies—should be engaged by their leadership to develop a common language in the form of a database platform system for facilitating the sharing and exchange of data, communication, and tracking of youth coming in and out of care, changing home and school placements as well as educational progress.

Overall Summary

The overall purpose of the Jefferson County, Kentucky's Pathway for Academic Stability and Success (PASS) demonstration project was to promote academic stability and success of foster youth in 6th thru 8th grade at risk for dropping out of school. Research and practice experience indicate that foster youth are at risk for poor outcomes with regards to their educational attainment and success because of a) ongoing behavioral and emotional problems and trauma due to past abuse and neglect, b) stigma and discrimination associated with "being" a foster youth, c) lack of emotional and behavioral connectedness to school, d) placement instability and concomitant school disruption, e) lack of availability as well as appropriateness of education interventions, f) being in systems that lack a method for tracking their academic progress and portability of their school records, g) lacking and/or inconsistent monitoring, accountability, and advocacy for youth's educational plan, h) cross-systems communication and information exchange barriers resulting from confidentiality rules and regulations, and i) fragmented interagency collaboration/coordination among systems of care because of isolating/silo-ing policies, procedures, and practices.

The Kent School of Social Work, University of Louisville in partnership with Kentucky Department for Community Based Services, Jefferson County Public Schools, Family and Children's Place, and Jefferson County Family Court, implemented and evaluated the Pathway for Academic Stability and Success (PASS) demonstration project by targeting 100 foster youth in 6th thru 8th grade in Jefferson County, KY over the 2 year grant period. The project approach focused on assessing and developing interagency infrastructure to more effectively respond to the educational needs of youth in care, and tracking and addressing the needs of the youth through the work of Student Success Navigators who coordinated the work of representatives of the partner agencies to promote educational stability and success for individual youth.

Pathway for Academy Stability and Success (PASS) Logic Model

PROBLEMS/NEEDS/CONDITIONS	INPUTS	ACTIVITIES	OUTPUTS	SHORT TERM	MEDIUM TERM	LONG TERM
<u> </u>	┌ ╱		<u> </u>	OUTCOMES	OUTCOMES	OUTCOMES
Nearly 700 children in foster care who are in in middle and high school Have the following risk factors: at risk for dropping out; performing below educational level; educational accomplishments are hampered by academic, social, emotional, and behavioral problems Educational plan does not fit with youth's neeeds and thus with inappropriate educational plan /program Experiences of placement instability-transfer problems; procedural problems in placements; difficulty in developing and maintaining social connections and relationships and engaging in activities Difficulty earning credits towards graduation due to emotional & behavioral problems that can't be managed in the classroom due to lack of resources. Record transfer/database problems-lack of keeping track of school records; Lack of Accountability/monitoring, outcomes/advocacy Ineffectual Interagency collaboration/coordination Confidentiality barriers	Federal Funding if awarded by DHHS Collaboration between U of L and Partners: Department for Community Based Services (DCBS), Jefferson County Public Schools, Jefferson County Family Court, Family & Children's Place Institutional knowledge at U of L and the Kent School of Social Work in developing and evaluating programs/services for at risk youth populations, training delivery, & evaluation	Obtain IRB approvals Conduct Focus Groups & interviews with youth, stakeholders Analyze results and make recommendations Set up program steering committee (PSC) Set up workgroups to review existing policies, procedures, & practices, educational services & interventions, coalitions and networks, tracking systems, data sharing, training, monitoring, accountability, and evaluating stability & success Build, establish, & develop capacity for educational stability and success based on review Set up Student Academic Stability & Success Navigator program Select Navigators Conduct educational assessments and provide related educational services and other services Provide opportunities for cross-system trainings Educate foster youth and families on student success Gather process and outcome data Analyze, report, and disseminate findings	IRB approvals from U of L Determine youth & stakeholders views on educational stability & success MOUs among PSCs Sworkgroups' plans and minutes Regular PSC & Workgroup meetings finitial child's educational assessments-needs & strengths completed finitial placement or any placement change for of youth participating in stability & success navigator program from youth receiving education on academic success foster parents receiving education on academic success froster parents receiving education on issues of foster children and academic success froster families, PSCs' participating in process & outcome evaluation Results and Reports Operations manual Presentations Journal articles on findings	Infrastructure for Pathway for academic stability & success established Increased number of well- functioning coalitions and networks Well-functioning PSC and workgroups	Clearer policies and procedures for remaining in same school, resolving disputes about what is in child's best interest, transfers, transportation Increased clearer communication, data sharing procedures, tracking method Greater targeted services Increased cohesion, collaboration, and coordination quality Improvements in school performance Increased connectedness to school and academics Fewer school changes and transfers Increases in appropriateness of a child's educational setting and proximity to the school in which child is enrolled at time of placement	Established Infrastructure with supported resources Shared responsibility among community partners for foster youth's educational stability and success Improvements in self-esteem Increased permanency and wellbeing and sense of educational security Increased stability: remaining in the school enrolled in prior to foster care placement

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APPENDIX

- 1-Project Steering Committee
- 2-Focus Groups Results
- 3-PASS Collaborating Agencies Policies and Procedures Analysis
- 4-Data Sharing Agreement (JCPS, F&CP, UofL)
- 5-Temporary Custody Order & Order Authorizing Medical Treatment & Educational Decision-Making
- 6- Educational Passport
- 7- Training Summary & Results
- 8- PASS Program/Service Delivery Manual
- 9- Descriptives of Foster Youth Served through PASS
- 10-PASS Evaluation Results (youth, collaboration, interview & stakeholder interview summary results)
- 11- Sample Powerpoint Slides of Trainings

Pathway for Academic Stability and Success (PASS) Demonstration Project Project Steering Committee

University of Louisville

Dr. Bibhuti Sar <u>bksar001@louisville.edu</u>
Dr. Becky Antle <u>becky.antle@louisville.edu</u>

Dr. Crystal Collins-Camargo

Dr. Emma Sterrett

Jenny Taylor

Melissa Gross

Crystal.collinscamargo@louisville.edu

emma.sterrett@louisville.edu

jenny.taylor@louisville.edu

mjk.gross@louisville.edu

Kris Bass (Student) nabass01@exchange.louisville.edu

Runora Jeffery (Student) rjjeff01@louisville.edu

Jefferson County Public Schools

Dr. Carol Bartlett

Dr. Sam Rich

Marsha Wiseman

carol.bartlett@jefferson.kyschools.us

sam.rich@jefferson.kyschools.us

marsha.wiseman@jefferson.kyschools.us

Angela Franconi

Becky Crump

Durk Davidson

Ricky Owens

Becky Crump

Durk Davidson

Ricky Owens

Angela Franconi@jefferson.kyschools.us

becky.crump@jefferson.kyschools.us

judi.vanderhaar@jefferson.kyschools.us

durk.davidson@jefferson.kyschools.us

ricky.owens@jefferson.kyschools.us

DCBS

Jackie Stampsjackie.stamps@ky.govDenise Weiderdenise.weider@ky.govKim Andersonkim.anderson@ky.govDesirea Rhodesdesirea.rhodes@ky.govAngie Cornettangie.cornett@ky.gov

Family and Children's Place

Elizabeth Ferguson Iferguson@famchildplace.org
Donna Russow drussow@famchildplace.org
Enrica Thomas ethomas@famchildplace.org
Tonya Clay tclay@famchildplace.org

Family Court

Jim Birmingham JimB2@kycourts.net

Seven Counties Services, Inc.

Robert Daniels <u>rdaniels@sevencounties@sevencounties.org</u>

Department of Juvenile Justice (DJJ)

Patricia Davidson <u>patricias.davidson@ky.gov</u>

PASS Demonstration Grant

Focus Group Analysis (January 2013-March 2013)

Youth Service Center Coordinators, Assistant Deans of Pupil Personnel, DCBS Workers, Birth Parents, Foster Parents, Foster Youth, and Family Court Judges 58 Participants

Theme 1

There is an unawareness of which youth are in foster care in the school unless told by the foster parent or caseworker (YSC, ADPP, DCBS, Foster Parent, Foster Youth)

"We don't always know who the foster care kids."

"If there is a problem we are working with the family on, we find out, but don't always know"

"....first the youth needs to be identified which is lacking in our current school system."

"If student comes in to enroll, sometimes you can tell automatically because they are not with the bio family, and family may say "we just got them as a foster child". Sometimes, very infrequently, a social worker will just show up after the child is already enrolled to check in "

"Teachers are often unaware that a student is a foster care child and of their home circumstances. When behavioral issues crop up at school, the teachers don't have an idea of the overall life circumstances of the student."

No one knows that the child is foster care (teachers, youth service center coordinators, counselors, and us). The foster parent enrolls them in school like any other parent so unless they introduce themselves as such, they might fly under the radar screen.

"I have three clients experiencing truancy right now that are in foster care, but the school never informed me of this. I only learned about it when I made a home visit."

The group stated that the actual knowledge by the foster child that he or she is in out-of-home care taints interactions with teachers, principals, counselors and peers. They don't want to be known as or called foster kids.

"No one knows I'm in foster care."

Subtheme 1:

However, for foster youth, this is a positive because they don't like to be known as a foster child (Foster Youth).

Kids say "That's why your parents don't want you" or "You will be worthless."

Teachers say these things too; when they (other kids) actually know the kid who is in foster care they treat them better than a kid they don't know.

"They try to feel bad for you. I don't want your sympathy; don't like people feeling sorry for me because it makes me feel like I am feeling sorry for myself."

"Teachers try and scare them: saying that they will call their foster parents"

"Talking about it [foster care] at school could make things worse."

Theme 2:

Confusion around Confidentiality (YSC, Foster Parent, Foster Youth, Family Court Judge)

Is there an issue with confidentiality to allow us to label those kids?"

"Found out if teachers announce that you are in foster care they can get fired."

Theme 3:

There is confusion around educational rights and policies across all systems (YSC, DCBS, Foster Parent, Family Court Judge)

"Not clear on who has educational rights limits our ability to set up IEP etc."

"The whole issue of who can sign consent forms for the foster child and who is responsible for filling out paperwork on the foster child is problematic."

The attendees in the focus group really could not speak to the question because they were not too sure of the policies and procedures related to improving educational stability in foster care children.

Theme 4:

Lack of communication between all parties (YSC, ADPP, DCBS, Birth Parent, Foster Parent, Foster Youth)

"DCBS caseworker should contact school and make them aware that child will be enrolling or child will be withdrawing from school. Sometimes student leaves and the school count their absence as not attending school rather than a formal withdrawal because no one comes forward and says the child is being moved to another school."

Caseworkers don't tell the school that the student has moved to another placement/home."

"Very little, if any, communication between school and DCBS."

When decision is made to place child in FC, when child is removed from placement, the school should be notified – and given information as to where they previously attended."

"Schools should talk with each other as to the child's behavior/performance and special ed. needs in school."

"Need greater communication from DCBS, foster parents, or birth parents— need to know something about these kids so we know how to deal with them."

"Caseworkers don't tell the school that the student has moved to another placement/home."

"Foster parents don't always share information with them when a school transfer happens. All parties really need to do a better job of sharing educational information between systems."

Other barriers include lack of communication, assuming others are doing something to enhance foster children's educational stability when they may in fact not be doing anything, personnel at all systems having too much on their plates, things getting "lost in the shuffle," not knowing what to do in terms of a set of policies and procedures to follow, not know whom to speak to in different systems in order to get things done, etc.

Barriers include lack of communication between schools and parents

Sub Theme 4:

Adverse communication between parents and schools (Birth Parent and Foster Parent)

...a superior attitude on the part of school personnel toward birth parents who have had their children removed from the home and retaliation against birth parents when they are very vocal and speak their mind concerning the state of affairs in their child's academic life (particularly when they have been mistreated by teachers in the classroom)

The first initial contact with the school is very critical. If a parent has a bad interaction with school personnel during the first contact, then subsequent interactions are going to be compromised. Some birth parents fear being judged by school personnel if they ask for help. They also have a fear of being incarcerated for certain behaviors and actions they may have taken or fear that their children will be taken in a CPS action based on what they reveal to outside parties.

Speaking up brings a rebuke or reproach from the school administrators. "You're being smart," is a common response from school personnel. Parents, especially birth parents they believe, often times don't get proper respect from the school staff. Often they are treated as outsiders.

Theme 5:

Lack of Cross-System Collaboration around foster youth and their educational stability (YSC, ADPP, DCBS, Foster Parent, Family Court Judge)

Not too much is happening currently in terms of cross-systems collaboration and coordination vis-à-vis foster care children's educational stability.

JCPS is difficult to work with in terms of transferring students to another school. Caseworkers attempt to keep foster children in the same school in order to minimize disruption. Caseworkers have to make the foster child "known" in the school system.

Getting the children enrolled and placed in school is problematic. It is a very traumatic experience for foster children to change schools. Some schools are easier to work with in terms of placement, transfers and enrollment. The group suggested that the process is smoother if you know someone at the school or if the youth plays sports.

There is a big "disconnect" between what is supposed to happen and what actually happens with the school in terms of provision of services.

Theme 6:

Teachers are not always aware, but informing teachers is not always the best idea. (YSC, DCBS, Foster Parent, Foster Youth)

"Teachers are often unaware that a student is a foster care child and of their home circumstances. When behavioral issues crop up at school, the teachers don't have an idea of the overall life circumstances of the student."

"Some teachers think they know more than they do. Makes them quick to label a kid based on a shown behavior. Teachers are quick to refer, but too little information can be dangerous. Don't really know much about traumatic events, abuse, etc."

"Sometimes teachers/asst. Principals will let kids get away with more if they know that they are in a certain situation."

"Better to give teachers small bits of info (i.e. trouble at home, sleepy in class) otherwise they go too far."

"Need to know basis. You get people talking in a building and teacher talk about it in the lounge, not helpful to student. IE. Kids on medication – yell out, "Are you taking your meds?"

"When she acted out in class, the teacher blurted out in front of the whole class: "You didn't take your medication today?" The student was very embarrassed by the incident.

"Rather than being a help, some teachers (and even some guidance counselors) can make problems worse for the foster children by blowing situations and behaviors out of proportion."

Sub Theme 6:

Foster Youth/Negative Perception of teachers:

Hurt when teacher announced that she would "call his foster mom."

Teacher has called him a "bitch", lying(write him up for cussing when he didn't"

If teachers are going to make up a reason to get him in trouble he is going to give them a reason.

Teacher would say things teachers shouldn't say, "I had to put her in her place a couple times."

[Teacher] Accusing u of doing nothing.

Teacher threw his notebook away, so he threw her stuff away.

Algebra teacher: She feels like if the teacher won't respect her than she won't respect the teacher, teacher compares her to the teacher's kids, raising voice at her if she's not yelling at her

Yes, teacher will ask "why are you talking" when he is doing his work, writes him up and then is suspended.

However, four of the youth said they would feel comfortable talking to a teacher at school. Others talked about the attendance clerk and two responded that they would feel comfortable going to someone strict.

Theme 7:

Quality of foster parents can be an issue (YSC, ADPP, DCBS)

One issue that can be problematic with the educational stability of foster care children is that the quality and commitment of the foster parents can vary pretty widely. Some foster parents are very committed to their foster care children, whereas others seem to be in it primarily for the money

Quality of foster care homes is an issue. Some are doing it for the money and do very little parenting.

Need to understand what is expected of the youth at school: clean and proper uniforms, school calendar, what happens when there is a school closing, what time school starts, how to reach the bus compound, what to do when youth is absent from school, homework responsibilities, and keeping youth on a routine or schedule.

Sub Theme 7:

Yet the foster parents are not often informed about the educational needs of their foster youth yet they are expected to advocate for their foster youth (Foster Parent). While the birth parents indicated that they do believe there is knowledge transfer between birth parents and foster parents (Birth Parent).

The foster parents by and large were not provided with any kind of educational information about their foster children when they were placed with them. Most of them answered a resounding "none" to the question. Very little paperwork from the school was provided to them. Social workers were willing to provide information if asked about the educational functioning of the foster child.

Foster parents suggested that had they known certain background information about their foster child when they were placed with them, then they would have made some different choices in terms of their care and support.

In some instances they found out ex post facto that their foster child previously had some significant behavioral problems.

The foster parents would have appreciated knowing basic information such as what grade the child was in, did they have an IEP that needed addressing, were they performing on grade level in their academic subjects, did they have truancy issues, did they have previous behavioral problems, was there a bus to get them home from school, etc.. They would have appreciated help with getting the foster child enrolled in school.

The birth parent group, as a whole, indicated that knowledge transfer about children does occur between birth parents and foster parents. Birth parents share information about the child's history, what they are currently doing, etc.

Personal advocacy (by the foster parent vis-a-vis the school and the school system) on the foster child's behalf is an effective vehicle for helping foster children succeed in school. Foster parents need to be proactive in procuring information to help their foster child and ask lots of questions.

One of the foster parents stated that they did not know how to get additional services at school for their foster child at first but they learned how to pursue services over time.

Theme 8:

Strategies/Services that have worked well (YSC, ADPP, DCBS, Foster Parent)

Services are available for all kids – hard to differentiate from FC kids to general pop.

Seven Counties-both onsite and at Seven Counties – for higher level needs

Louisville Seminary – lower level needs

Nutritional needs-Free and Reduced Lunch
Kent School students – They buddy with problematic kids and check in with them
periodically

Ameri-core students – 3 schools have them--YSC

Mentoring Grant through U of L

They have used a high school liaison to help with improving the educational stability of foster care children

They sometimes call the child's former foster parents for advice on how to handle the foster child.

They sometimes go to the YSC for help if the YSC is on the ball and can get things done.

They occasionally call school board members and superintendents for help.

Certain school personnel are helpful to get involved to improve the educational stability of foster children such as YSCs, although some of the YSCs are more useful than others.

One of the foster parents indicated that one of the custodians [a mentor] at the school was helpful in calming down his foster child because he was a former foster child and could relate to the foster child's situation.

Some foster parents have gone to see their foster children's guidance counselors with varying degrees of success in terms of helping the foster child academically.

One or two foster parents have used "Infinite Campus" online to check their child's academic progress.

One foster parent talked about her own personal strategies to help her foster child. She has employed strategies such as talking to them about rewards and punishments (i.e., losing out) of engaging in certain behaviors. She talks to them about how far they can go in life by being a responsible person. She lifts herself up as role model in this regard in terms of her educational attainment, employment history, etc.

Theme 9:

General Training Recommendations (YSC, ADPP, DCBS, Birth Parent, Foster Parent, Foster Youth, Family Court Judge)

"If you just offer something – small fraction will attend."

"Possibly – work with a school on in-service days or the like, work with all teachers and give practical information, things they can use."

"Address an issue of what to do if YSC is not available. Something tangible, "if X is going on, do ABC".

"Training about all kids, not couched in foster kids – looking more at trauma."

"Training for foster children should include instilling a sense of pride and self-worth. They also need training on anger management, curbing fears and dealing with traumatization."

"Training for parents needs to include subjects like parental rights and how to navigate the school system."

"There is a very real need for open, non-judgmental, non-superior communication between parents and school personnel. Everyone needs to have a voice. Parents and children are only allowed to speak up so much with school personnel."

Student Response Team – a district team under Theresa Whitlow, which addresses those students that have intensive behavior needs. It was recommended that the grant train this team in trauma and the effects of abuse and neglect as they are not always informed and helpful. Team can take student out of setting if need be and go over de-escalation techniques. (this happens at Olmstead North)

They also feel that training on protection and advocacy for caseworkers and student rights for foster parents is warranted.

Training on SOPs related to the education of foster care children is really needed

What do we do with a foster youth when working with them? Do we treat them differently than we would a normal truant middle schooler?

Trauma-How to address? How to refer for counseling? In particular, the ADPP would like to understand what happens to children in Foster Care. What triggers negative behavior? What strategies can be used when dealing with youth with trauma?

The foster parents pointed out the vast majority of foster parent training sessions are not mandatory (with the exceptions being Handling Head Trauma and Utilizing Medications). They are voluntary trainings.

They feel that training on enhancing the educational stability of foster care children should be a mandatory part of the foster parent training. Along with that, they feel that the training should be standardized (i.e., uniform) across the State of Kentucky.

Training of caseworkers (on things such as medical mileage), school personnel and judges is warranted, in their estimation

Teachers: Neither teachers nor Foster Parents are required to have training around abuse and neglect, trauma, or educational policies (ECE, etc.).

"No trainings for teachers – just Duty to Report."

"Some teachers attend safe crisis trainings, de-escalation, etc. Not mandatory, not all attend, and none actually cover trauma."

For Youth:

"Training for foster children should include instilling a sense of pride and self-worth. They also need training on anger management, curbing fears and dealing with traumatization."

There needs to be an orientation for teenagers who enter out-of-home care. Some children enter into out-of-home care from relative care (kinship care) and need training on expectations of the new foster parents (e.g., curfew). They also need to learn how to navigate the school system for themselves.

The foster parents believe that such a program should happen outside of their home (and off campus) in some formalized setting. Foster children need to know what is expected of them educationally.

Where to have the training for the Youth:

Not in School

"If u at home, you feel more comfortable."

"Not in school so that other foster kids don't know your business, awkward to be around people you don't know, that kind of discussion could make you angry or emotional, not want others to see you that way."

"It would be better to with other foster care youth at a local community center or at Neighborhood Place. There is too much negative labeling and stigma attached to being a foster child that holding the training in the school is problematic for that reason."

With Whom:

"If you were with other foster kids it would be more fun."

"With other foster kids to see what other kids are going through."

Be good with kids in foster care and with biological kids so those not in foster care can better understand, teach non-foster care kids to learn how to treat kids in foster care. Foster Youth

What would make it hard for youth to participate from their point of view:

- Time of the day
- Not enough time
- Don't feel comfortable telling foster parents where they are
- Transportation
- Not wanting to be there

Suggestions from the youth for trainings

- Rewards- kids will talk more
- Food
- Raffle
- Make a Facebook page
- Use Instagram, twitter
- Be invited back to be a guest speaker or leader to share own experiences with younger children in foster care

Storytelling, Games, Movies about stuff like foster care, Art projects, Origami, comic books, Pamphlet/workbooks

Theme 10:

Overall Recommendations for the PASS Demonstration Grant to increase educational stability (YSC, DCBS, Foster Parent)

"[There needs to be a] rule around every kid in OOHC needing a meeting – caseworker, parent, etc. – keep everyone on the same page. Need to know who to call if emergency – foster parent, caseworker, etc."

They firmly believe that all stakeholders involved should have access to all the same information.

A formal, systematic policies and procedures protocol dealing with educational issues relative to foster care children needs to be put in place in order to facilitate increased cross-systems collaboration and coordination.

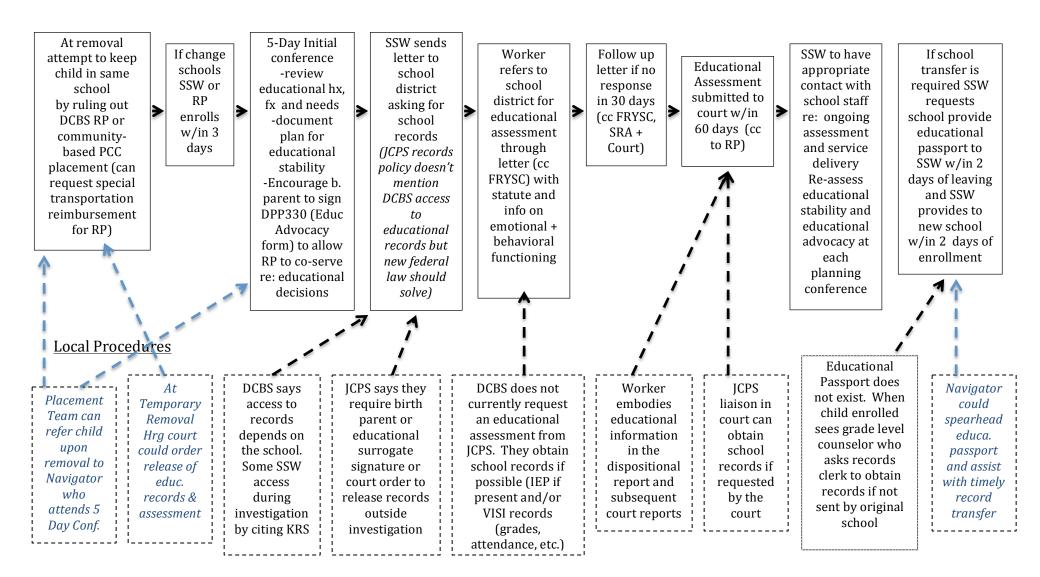
Educational Navigators should:

They like the idea of an educational navigator who can communicate with all stakeholders involved and perhaps help mitigate educational disruptions. The educational navigator should help by being the person to notify about placement moves, kids' behavior, etc.. They should be knowledgeable about multiple local community resources. They can function as a kind of "resource connector." The educational navigator can connect foster children to extracurricular activities such as sports which enhance foster child physical and psychological well-being by getting them outside of the foster home and interacting with other kids.

They think a school system point person is needed to help the educational navigator increase cross-systems collaboration and coordination

PASS Collaborating Agencies Policies and Procedures

DCBS SOP Related to Educational Stability and Performance

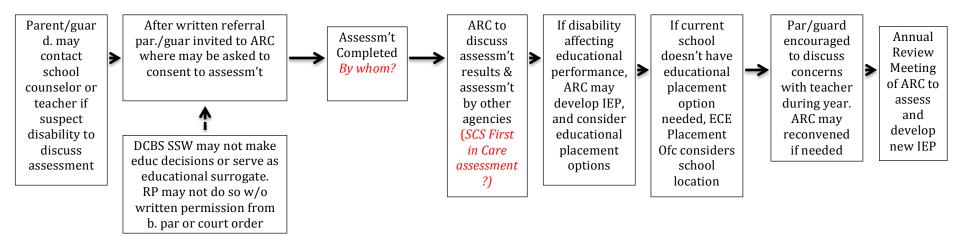


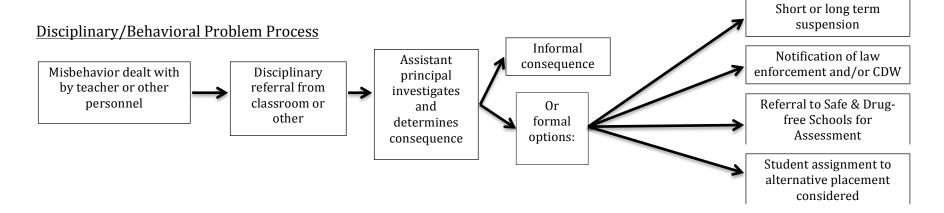
ICPS Procedures

General Educational Policy



Exceptional Children's Education

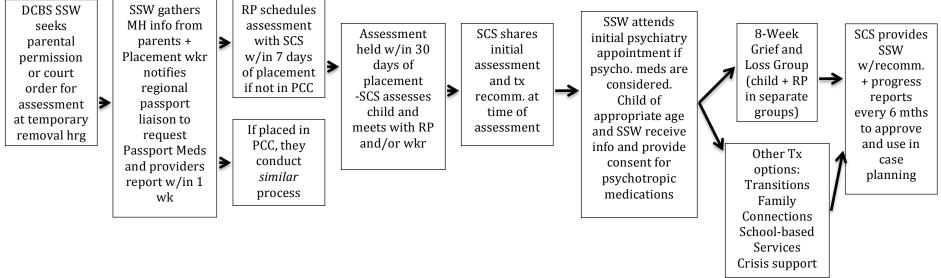




First in Care Program

Assessment and Treatment

- Psychosocial evaluation [includes some school/learning-related items]
- Daily Living Activities Youth Mental Health Scale (DLA-20) [includes a couple school-related items]
- Behavior Assessment System for Children 2nd Edition (BASC-2) [includes a few school-related items]
- To what extent is an educational component included in the assessment report? Could it be?



Training

SCS provides trauma training to RPs quarterly



JEFFERSON COUNTY BOARD OF EDUCATION

February 25, 2013

Agenda Item:

V.R. Approval of Data Sharing Agreement with the University of

Louisville and Family and Children's Place

Recommendation:

Superintendent Donna Hargens recommends that the Board of Education approve the attached Data Sharing Agreement with the University of Louisville and Family and Children's Place and authorize

the superintendent to sign same.

Rationale:

The district is currently a partner with the University of Louisville Kent School of Social Work, Family and Children's Place, Jefferson County Family Court, and the Kentucky Department of Community Based Services in the Pathway for Academic Stability and Success (PASS) demonstration project.

This project is designed to promote academic stability and success of foster youth in grades 6-8. The project is funded through a grant from the U.S. Department of Health and Human Services as part of their Child Welfare-Education System Collaboration to increase educational stability.

The University of Louisville is the primary grantee.

Submitted by: Dr. Robert J. Rodosky



DATA SHARING AGREEMENT BY AND BETWEEN JEFFERSON COUNTY BOARD OF EDUCATION AND UNIVERSITY OF LOUISVILLE KENT SCHOOL OF SOCIAL WORK AND FAMILY AND CHILDREN'S PLACE

This Data Sharing agreement (the "Agreement") is by and between the Jefferson County Board of Education (dba Jefferson County Public Schools), the University of Louisville Kent School of Social Work (UofL), and Family & Children's Place, Inc. (FCP). Jefferson County Public Schools (JCPS) agrees to provide student demographic, attendance, disciplinary and course outcome data to UofL and FCP for the purpose of evaluating the success of the Pathway for Academic Stability and Success (PASS) program. UofL and FCP agree to use the data only for the purpose for which it was disclosed and outlined in this Agreement. The terms of this agreement are through September 30, 2014 unless terminated in writing by one or both parties.

Pursuant to written authorization from the parent, guardian and/or foster parent with written permission from the parent of the participating students, JCPS will provide UofL and FCP the following data annually during the term of this Agreement with respect to students participating in the PASS program.

- 1) School name
- 2) District name
- 3) Masked student identifier

The following student-level data will be provided annually during the term of this Agreement for all students served by the PASS program. Students participating in the PASS program must be flagged

with the PASS name. This information should be contained in a unique column. The participant file should contain each of the data elements contained herein.

- 1) Unique student identifier
- 2) Grade level (for *current* year: 2012-2013 for Year 1 submission; 2013-14 for Year 2 submission)
- 3) Grade level (for current year: 2012-2013 for Year 1 submission; 2013-14 for Year 2 submission)
- 4) English language learner (ELL) status
- 5) Free/reduced-price lunch status
- 6) Individualized education program (IEP) status
- 7) Student's strengths, challenges, interests as listed in the Individualized Learning Plan (ILP)
- 8) Disciplinary referrals
- 9) Dates of any suspensions
- 10) Enrollment (for current year: 2012-2013 for Year 1 submission; 2013-14 for Year 2 submission)
- 11) Enrollment status (for *current* year: 2012-2013 for Year 1 submission; 2013-14 for Year 2 submission)
- 12) Reading assessment proficiency
- 13) Math assessment proficiency
- 14) Grade Point Average
- 15) EXPLORE Results
- 16) Total absences
- 17) Ethnicity
- 18) Race
- 19) Sex
- 20) Courses failed (all)

02/08/2013 Page 2 of 2

- 21) Courses failed (core)
- 22) Credits earned

02/08/2013

- 24) School of enrollment (number and name)
- 25) District of enrollment (number and name)
- 26) Student home zip code

These data will be provided by JCPS to UofL and FCP by uploading the data to a secure site or 'portal,' that is maintained by UofL and FCP. These data will be used to evaluate the success of the PASS program and its participants. UofL and FCP acknowledge that any unauthorized disclosure of confidential student information is a violation of the Family Educational Rights and Privacy Act of 1974 (FERPA) and the implementing regulations found in 34 CFR Part 99 and shall not be permitted to occur. Accordingly, UofL and FCP acknowledge and assure that in all reports, electronic or otherwise, derived from information made available under this Agreement, all data shall be aggregated in such a way that no individual will be identified directly or by deduction. UofL and FCP further acknowledge and assure that the student-level data elements will not be released to any third party.

While in possession of these data, UofL and FCP acknowledge and agree that it shall permit access only to its employees and service providing contractors, in each case, who are authorized to assist with conducting an evaluation of the success of the PASS program. All UofL and FCP employees and service providing contractors who are authorized to have access to the data have (or will, prior to gaining access to the data) certify their understanding that they may be held individually liable for any and all criminal and civil penalties imposed for breach of confidentiality ("Access to Confidential Data"). UofL and FCP also agree to store the data in a secure and locked area and to prevent unauthorized access. UofL and FCP agree to destroy all student-level data files after the final report to U.S. Department of Health and Human Services, Administration for Children and Families (ACF) is approved or immediately if this Agreement is terminated.

At the conclusion of its collection and evaluation of the PASS program, UofL and FCP will prepare a report summarizing and explaining its findings based on the data (the "Report") and provide

Page 3 of 3

such Report to the ACF. The Report will include only aggregate-level findings so that no individual can be identified directly or by deduction. UofL or ACF may publish aggregate-level findings and/or the Report.

IN WITNESS WHEREOF, the authorized representatives have caused this Agreement to be executed effective as of the date signed by the last party.

Jefferson County Board of Education:		
By:	Date:	
University of Louisville:		
Ву:	Date:	
Family & Children's Place, Inc.		
By:	Date:	

such Report to the ACF. The Report will include only aggregate-level findings so that no individual can be identified directly or by deduction. UofL or ACF may publish aggregate-level findings and/or the Report.

IN WITNESS WHEREOF, the authorized representatives have caused this Agreement to be executed effective as of the date signed by the last party.

Jefferson County Board of Education:	Date: 2/25/13
University of Louisville:	Date: /
By: Bobb W	Date: 2-/2-/3
Families & Children's Place, Inc.	
By: Wyw. Right 1 mc	Date: $\sqrt{2}$

DRAFT FORM 19 NEW

This form is being released for a review of content only and is not yet formatted as an official AOC form.

AOC-DNA-19 Doc. Code _____ Rev. 5-14 Page 1 of 2

Commonwealth of Kentucky



TEMPORARY CUSTODY ORDER

Case No
Court: [] Family [] District
County
Division

www.courts.ky.gov KRS 605.110; KRS 620).145	& Order Authorizing [] MEDICAL TREATMENT [] EDUCATIONAL DECISION-MAKING		Division
IN THE INTEREST OF:				, A CHILD
DOB		Sex	Race	SSN
In accordance w	ith the Find	lings of Fact and Conclu	sions of Law entered sepa	rately, IT IS HEREBY ORDERED
that temporary custody of	of the above	e-named child be granted	d to:	
		Name of Person(s), Home or Facility	
			ress	
IT IS FURTHER ORDER	RED as follo		1633	
			v consent to any routine a	nd necessary or emergency medical
			,	the child's medical records.
			and phones numbers are:	
		, ,		
2. [] That the abo	ve-named	temporary custodian, an	d the designated represen	tative of the Cabinet for Health and
Family Services	, are hereby	y authorized to review the	e child's educational recor	ds maintained by the
	C	ounty Public Schools an	d to receive information re	lated to the child's educational
placement and p	erformance	e as may be needed.		
3. [] The biologic	al parent(s) is/are unwilling or unab	le to work with educationa	I professionals and social service
personnel to ma	ke educatio	onal decisions for the chi	ld, therefore the rights of the	ne parent(s) to make educational
decisions for the	child are h	ereby suspended. If the	child is in need of evaluat	tion to determine the need for
special educatio	n services	or has been identified to	receive special education	services, in accordance with the
Individuals with	Disabilities	Education Act (IDEA), 20	0 U.S.C. § 1400 <i>et seq.</i> , th	e child's temporary custodian(s)
named above m	ay make ed	ducational decisions for t	he child unless the tempo	rary custodian is the Cabinet and
the child is place	ed in foster	care or with a relative. If	f the child is placed in foste	er care or with a relative, the child's

foster parent or relative may make educational decisions.

DRAFT FORM 19 This form is being released for a review of content only and is not y	NEW yet formatted as an official AOC form.
In the event the foster parent fails or is unable to act, the child s Public Schools for appointment of an education surrogate.	shall be referred to the County
Judge Distribution:	Date
[] Court File[] CHFS or facility or agency where child is placed[] All counsel of record and/or parents/custodians of the child who are	e not represented by counsel



CABINET FOR HEALTH AND FAMILY SERVICES OFFICE OF THE SECRETARY

Steven L. Beshear Governor

275 East Main Street, 5W-A Frankfort, KY 40621 502-564-7042 502-564-7091 www.chfs.ky.gov Audrey Tayse Haynes Secretary

PROTECTION AND PERMANENCY MEMORANDUM, 14-16

TO: Service Region Administrators

Service Region Administrator Associates

Service Region Clinical Associates Regional Program Specialists Family Services Office Supervisors

FROM: Tina Webb, Assistant Director

Division of Protection and Permanency

DATE: December 5, 2014

SUBJECT: Updated Educational Passport

In an effort to improve the process of assessing the educational needs of children in out of home care the <u>Educational Passport</u> form has been updated to provide more comprehensive information about children in out of home care. These updates were the result of collaborative work between the University of Louisville, DCBS and the Jefferson County Public School System.

The Educational Passport form is completed whenever children entering out of home or who are already in out of home care change schools, for any reason. The DCBS worker provides the form to the child's current school for completion; and it is the responsibility of the school that the child is leaving to forward the information on to the child's new school.

If you have any questions regarding the updates made to this document, please contact:

Denise Weider, Adoptions Branch Denise.weider@ky.gov (502) 564-2147, ext. 3607





EDUCATIONAL PASSPORT

This form is for the purpose of enrolling the student in school. It is to be completed by the school/facility from which the student is leaving. This form is mandated by KRS158.137 and KRS 605.110(3)e and shall be presented, by the SSW or foster parent, to the receiving school or educational facility within two (2) days of enrollment. **Information contained on this Passport is subject to confidentiality laws**. Pursuant to provisions in the FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT Section 444(b) of the General Education Provisions Act (20U.S.C. 1232g(b)), the child's social services worker may request copies of educational records listed on this form. The school is to waive all fees, per 702 KAE 3:220

STUDENT NAME		STUDENT ID	#
BIRTHDATE	GRADE	TOTAL CREDITS EA	RNED TO DATE
STUDENT WITHDRAWAL DA	TE	-	
(Include District Name)			
Pho	one		
TOTAL DAYS ENROLLED AT TEMERGENCY CONTACT NAM			
LIVILINGLING CONTACT NAIV	IL/ADDINESS	PHONE NUMBER	
		RELATIONSHIP TO STUDENT	
EDUCATION ADVOCATE	Yes No If so,	who?	
	103 II 100 II 30,	wiio:	
	DDC /L'ar all assessed as		- 1\
		ovided to the receiving school	•
Physical Exam	☐ Yes ☐ No	Vocational Test	Yes No
Immunization Certificate	☐ Yes ☐ No	Graduation Plan/	☐ Yes ☐ No
Expiration Date		Transition Plan	
Tuberculin Skin Test	☐ Yes ☐ No	Official Transcript Record	☐ Yes ☐ No
Birth Certificate	☐ Yes ☐ No	Current Report Card	☐ Yes ☐ No
Social Security Card	☐ Yes ☐ No	Attendance Record	☐ Yes ☐ No
Psychological Evaluation	☐ Yes ☐ No	KY Performance Rating for Ed	ducational Progress
		(KPREP)	☐ Yes ☐ No
504 Plan	☐ Yes ☐ No	Individualized Learning Plan	· · ·
I.E.P.	☐ Yes ☐ No	Commont Classes	Yes No
	<u></u>	Current Classes	Withdrawal Date
Achievement Test	☐ Yes ☐ No		
CTBS Results	☐ Yes ☐ No		
Portfolio	☐ Yes ☐ No		
Special Health Needs	☐ Yes ☐ No		
Special Medications	☐ Yes ☐ No		
Person Providing Informa	tion	<u> </u>	Date
Signature of School Official	al		
Signature of Seriour Offici	^ ·		

1. Type of school setting:	☐ Mainstream	☐ Contained	☐ Special	Education	☐ Other
Explain (if other)					
2. Name of Teacher					
If not attending school, wh	at educational service	s is the student i	receiving and	from whom?	?
3. Total number of school	changes NOT due to a	grade promotio	on? What we	re reasons fo	or changes?
4. How many missed days	of school this year? _		Reasons		
5. Is this student performi	ng at grade level? \Box	Yes□ No	Explain		
6. Does this student have: If so, is this student on trac		ribed goals? Exp	olain		
7. How motivated is this st Not motivated at all		chool?	4	Very moti	vated
8. Areas in school where the	nis student excels				
9. What are some behavio	r/motivation strategi	es that this stud	ent best respo	onds to?	
10. What are some behavi	or/motivation strateg	gies this student	does NOT res	pond well to	o?
11. Date of last education	al evaluation or asses	sment		Results	
12. Extracurricular activities	es this student is invo	lved/interested	in?		
13. Any barriers to partici	pation in extracurricu	lar activities?			
14. Are there known socio	emotional issues imp	peding this stude	ent's school po	erformance?	? Explain
15. Are there known envir	onmental issues impe	eding this studer	nt's school per	rformance?	Explain

Training Summary Super Saturday, May 18, 2013 2:30 PM – 4:00 PM Jefferson Community and Technical College

Fourteen foster parents were trained on the following areas:

- Prevalence of disabilities and education problems among children in care
- School outcomes of children in care
- Factors that contribute to success in school
- •Special Education
- •Interacting effectively with schools

A pre-test and post-test (see attached) was distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Of the 14 participants, 13 (92.90%) identified as female and 1 (7.1%) identified as male. In regards to race, 13 (92.90%) identified as Black/African American and 1 (7.1%) as Caucasian. Participant's ages ranged from 36 to 78 with the mean age being 55.23 years. The average amount of years participants reported being a foster parent was 9.36 thus it was an experienced group. Participants were also asked about their level of education and approximately 13 (92.90%) had some college or a degree.

Level of Education	Number	Percent
High School/GED	1	7.1
Some College	6	42.9
Associates Degree	3	21.4
Bachelor's Degree	3	21.4
Master's Degree	1	7.1
Total	14	100.0

On a scale of 1 to 5, with 1 being "Not Satisfying at All" and 5 being "Very Satisfying", participants were asked to report on their overall experience working with schools on issues related to foster care. The overall mean score was 3.75 indicating that participants were somewhat satisfied with their experiences.

Knowledge

On the pre-test and post-test, participants were asked to read the following statements and indicate whether the statements were true or false. Statements 1-7 were true while statement 8 was false. Below are the percentage of participants who got the correct answer from both the pre and post-test.

	D	D 4
1 Child abuse and neglect can result in significant	Pre Correct: 12	Post Correct 13
1. Child abuse and neglect can result in significant developmental and academic delays in school age	(86%)	(93%)
children and youth.	(0070)	(2370)
2. Difficult school experiences are strong predictors of	Correct: 14	Correct: 13
dropping out, substance abuse, juvenile delinquency,	(100%)	(93%)
unemployment, and increasing need for welfare		Missing: 1
assistance among adolescents and adults with a past		(7%)
history of being abused and neglected.		
3. Students who switch schools frequently score lower	Correct: 11	Correct: 13
on standardized tests.	(79%)	(93%)
	Missing: 1	
	(7%)	
4. Students can be considered chronically absent even if	Correct: 11	Correct: 11
they only miss a day or two every few weeks.	(79%)	(79%)
		Missing: 1
		(7%)
5. Extracurricular activities can help youth in foster	Correct: 12	Correct: 13
care improve in the areas of academic achievement,	(86%)	(93%)
behavior, and identity development.		Missing: 1
		(7%)
6. Under the Individuals with Disabilities Education	Correct: 12	Correct: 12
Act (IDEA), birth parents are supported as education	(86%)	(86%)
decision makers even when their children/youth are	Missing: 1 (7%)	Missing: 1
placed in out of home care.	3 ()	(7%)
7. An educational surrogate can be appointed on behalf	Correct: 12	Correct: 13
of a foster youth when parental rights have been	(86%)	(93%)
terminated or the parent of the child is not known or		
cannot be located.		<i>a</i> 10
8. Foster/Resource parents have all the same rights as	Correct: 7	Correct: 10
birth parents in making educational decisions about the	(50%)	(71%) Missing: 1
children in their care		Missing: 1 (7%)
		(770)
	I	I

Self- Efficacy

On a scale of 1 to 5, with 1 being "not at all" and 5 being "very much so", participants were asked to respond to the following questions on the pre and post-test. Although the mean score increased on all three questions, the change was not statistically significant.

	Pre Mean	Post Mean
1. I understand that getting used to new teachers,		

classmates, curricula, buildings, and expectations can be traumatic for a child.	4.64 N=14	4.76 N=13
2. I know how to advocate for the children or youth in my care in regards to their education.	3.93 N=14	4.15 N=13
3. I am comfortable taking the lead in ensuring that the educational needs of children or youth in my care	4.5	4.53
are being met.	N=14	N=13

Satisfaction

Nine satisfaction questions were posed regarding the participant's satisfaction with training. The first three questions were on a scale of 1 to 5, with 1 being "strongly disagree" and 5 being "strongly agree."

	Mean
The facilities and equipment were favorable for learning.	4.64 (n=11)
I was able to take this training when I needed	4.60 (n=10)
The way this training was delivered (such as classroom,	4.83 (n=12)
computer, and video) was an effective way for me to	
learn this subject matter.	

Questions 4-6 were on a scale of 1 to 5, with 1 being "not at all helpful" and 5 being "very helpful."

	Mean
The use of exercises as a component of training	4.45 (n=11)
The use of handouts as a component of training	4.54 (n=13)
The use of lecturing as a component of training	4.75 (n=12)

Question 7 was on a scale of 1 to 5, with 1 being "not likely to apply" and 5 being "very likely to apply."

	Mean
How likely are you to apply the knowledge you have	4.85 (n=13)
learned in the training	

Question 8 was on a scale of 1 to 5, with 1 being "not at all important" and 5 being "very important"

	Mean
Overall, how would you rate the importance of training	4.46 (n=13)
you have received	

Question 9 was on a scale of 1 to 5, with 1 being "too little info" and 5 being "too much info."

	Mean
How would you rate your view of the amount of material	4.23 (n=13)
covered in this training	

Training Summary
SAFY Foster Parent Training
10:00 AM – 1:00 PM
Bernheim Forest

Twenty nine foster parents were trained in the following areas

- Advocacy skills
- *The importance of documentation*
- Compassion fatigue, burnout, and secondary (vicarious) trauma
- •Self-Care

A pre-test and post-test (see attached) were distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Demographics

Of the 29 participants, 23 (79.3%) completed a pre-test and post-test. Of the 23 participants that completed the demographic portion of the pre-test, 14 (60.9%) identified as Caucasian, 8 (34.8%) as Black/African American and 1 (4.3%) as Hispanic/Latino. Participant's ages ranged from 33 to 63 with the mean age being 43.80 years. The average amount of years participants reported being a foster parents was 3.86 years thus it was a somewhat experienced group. Participants were also asked about their level of education:

Level of Education	Number	Percent
Less than High School	3	13.0%
High School or GED	10	43.5%
Bachelor's Degree	6	26.1%
Master's Degree	4	17.4

Knowledge

On the pre-test and post-test, participants were asked to read the following eight statements and indicate whether the statements are true or false. Statements 1, 2, 4, 5, and 6 were true while 3, 7, and 8 were false.

	Pre (23	Post
	returned)	
1. Being available including always returning	Correct: 22	Correct: 23

phone calls and keeping appointments is considered an important advocacy strategy.	(95.7%)	(100%)
2. Maintaining professionalism while working with a foster care team includes dressing professionally, keeping boundaries with professionals, and being honest with your worker about any and all concerns about the child in your care.	Correct: 21 (91.3%)	Correct 23 (100%)
3. It's important to only document negative events, problems, and issues and not a foster child's successes.	Correct: 23 (100%)	Correct: 23 (100%)
4. The constant demands of caring for others can result in compassion fatigue.	Correct: 20 (87%)	Correct: 22 (95.7%)
5. Emotional exhaustion, negative self-concept and job attitude, as well as a loss of concern and feelings for others are all signs of burnout	Correct: 21 (91.3%) Missing: 1 (4.3%)	Correct: 23 (100%)
6. Internalizing events that a foster child has or is currently experiencing can cause symptoms similar to post-traumatic stress in caretakers	Correct: 19 (82.6%)	Correct: 19 (82.6%) Missing: 1 (4.3%)
7. Vicarious (secondary trauma) can affect us physically, emotionally, and behaviorally, but not cognitively.	Correct: 18 (78.3%)	Correct: 16 (69.6)*
8. Self-care is a luxury to be fulfilled as time permits	Correct 18 (78.3%)	Correct: 17 (73.9%)*

^{*}Knowledge Scores Decreased

Self-EfficacyParticipants were asked to circle the statement that best fits them.

	Pre	Post
1. unaware of how to advocate for my foster	0	0
children/youth		
2. aware of this information but would like more	3 (13%)	4 (17.4%)
information about this subject		
3. not sure how to best use this information	1 (4.3%)	0
4. interested in this information and would like to	1 (4.3%)	0
prepare myself so as to use this information in some		
meaningful way		
5. ready to use this information as it applies to	4 (17.4%)	4 (17.4%)
taking care of my foster children/youth		

6. already using this information and plan to continue	6 (26.1%)	7 (30.4%)
Participant circled more than one statement	8 (34.8%)	8 34.8%)

Satisfaction

Eight satisfaction questions were posed and were on a scale of 1 to 7 with 1 being "Not at All", 4 being "Somewhat", and 7 being "Very much so".

	Mean
1. The timing of the presentation was convenient	5.74 (n=19)
2. The meeting space was conducive for learning	6.00 (n=20)
3. This presentation was delivered in an effective way for my learning	6.15 (n=20)
4. The use of handouts was an effective part of this presentation	5.70 (n=20)
5. The use of exercises was an effective part of this presentation	6.05 (n=20)
6. The presentation increased my knowledge of the topic area	5.95 (n=20)
7. The information appeared to be thoroughly researched	6.50 (n=18)
8. It is likely I will apply the knowledge I have learned in this training	6.35 (n=20)
Composite Mean	47.50 out of 56 (n=20)

Participants were also asked to rate the importance of the training they received on a scale of 1 to 5 with 1 being "Not at all Important" and 5 being "Very Important." The mean score was 4.71.

Training Summary
DCBS Workers, October 18, 2013
Boy's and Girl's Haven

Twenty-seven DCBS workers completed data on the following areas:

- Understanding Traumatic Stress and different types of trauma
- •Prevalence of trauma and effects of trauma in childhood development
- Factors that are inclusive of trauma-informed treatment
- Tips on what workers can do to best support youth in care
- How to be an educational advocate
- •Legislation that supports educational stability and success

A pre-test and post-test (see attached) was distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Of the 27 participants, 21 (77.8%) identified as female and 4 (14.8%) identified as male, 2 (7.4%) did not complete. In regards to race, 11 (40.7%) identified as Black/African American and 15 (55.6%) as Caucasian and 1 (3.7%) identified as biracial. Participants' ages ranged from 22 to 69 with the mean age being 40.3 years. The average number of years participants reported working at their current agency was 10.12 years and the number of years employed in this field was 12.19, thus it was an experienced group. Participants were also asked about their level of education and approximately 25 (92.59%) had a Bachelor's or Master's degree.

Level of Education	Number	Percent
Bachelor's Degree	15	55.6
Master's Degree	10	37.0
Missing	2	7.4
Total	27	100.0

Knowledge

On the pre-test and post-test, participants were asked to read the following statements and indicate whether the statements were true or false. Statements 1-6 were multiple choice while statements 7-12 were true-false. Below are the percentage of participants who got the correct answer from both the pre and post-test.

who got the correct answer from both the pre and post		
	Pre	Post
1. Childhood traumatic stress includes both physical and	Correct: 27	Correct 27
emotional responses to an event.	(100%)	(100%)
2. Complex trauma involves both the exposure to chronic	Correct: 24	Correct: 26
trauma and its impact on the child.	(88.9%)	(96.3%)
	Missing: 1	Missing: 1
	(3.7%)	(3.7%)
3. Adults who were in foster care as children show higher	Correct: 20	Correct: 25
rates of PTSD than veterans.	(74.1%)	(92.6%)
	Missing: 1	
	(3.7%)	
4. Maximizing a child's sense of safety and coordinating	Correct: 26	Correct: 26
services with others are essential to trauma informed care.	(96.3%)	(96.3%)
·	Missing 1 (3.7%)	
	G . 25	G . 22
5. Physical and medical problems are not an indicator of	Correct: 25	Correct: 22
trauma exposure.	(92.6%)	(81.5%)

	Missing: 1 (3.7%)	Missing: 1 (3.7%)
6. There is only one appropriate evidence-based therapy for childhood trauma.	Correct: 24 (88.9%) Missing 1: (3.7%)	Correct: 24 (88.9%) Missing: 1 (3.7%)

Self- Efficacy

On a scale of 1 to 5, with 1 being "not at all" and 5 being "very much so", participants were asked to respond to the following questions on the pre and post-test.

	Pre	Post
1. I am comfortable making service referrals for	4.44	4.44
traumatized children.	N=27	N=27
2. I know what to do to make service referrals to the	2.30	3.78
PASS grant.	N=27	N=27
3. I am comfortable interacting with and working	4.30	4.37
with traumatized children.	N=27	N=27
4. I am committed to helping traumatized children to	4.74	4.44
the extent I am able.	N=27	N=27

Satisfaction

Twelve satisfaction questions were posed regarding the participant's satisfaction with training. The first three questions were on a scale of 1 to 5, with 1 being "not at all" and 5 being "very much so."

	Mean
This training increased my knowledge of this subject	4.26 (n=27)
This training increased my skills in this area.	4.11 (n=27)
Stated goals and learning objectives were met.	4.33(n=27)
The information was delivered in an organized and understandable manner.	4.44 (n=27)
The presenter was knowledgeable in this subject.	4.52 (n=27)
This training increased my knowledge of the definition of trauma.	4.26 (n=27)
This training increased my knowledge of the types of trauma.	4.11 (n=27)
This training increase my knowledge of the effects of trauma.	4.19 (n=27)
This training increased my knowledge of the needs of traumatized children.	4.11 (n=27)

I would recommend this training to colleagues.	4.26 (n=27)
I am likely to use this training in my work.	4.37 (n=27)
This training is important for members of my field.	4.60 (n=27)

Training Summary
Neighborhood Place Training
11:00 AM – 11:50 PM October 25, 2013
Louisville Marriot East

Thirty-five care givers were trained in the following areas

- •Stress reduction
- Compassion fatigue, burnout, and secondary (vicarious) trauma
- •Self-Care

A pre-test and post-test (see attached) were distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Demographics

Of the 34 participants, 32 (94.1%) completed a pre-test and post-test. Of the 32 participants that completed the demographic portion of the pre-test, 24(70.6%) identified as Caucasian, 5 (14.7%) as Black/African American and 1 (2.94%) as Multiracial. Participant's ages ranged from 21 to 64 with the mean age being 45.48 years. The average amount of years participants reported working in this field was 16.88 years thus it was an experienced group. Participants were also asked about their level of education:

Level of Education	Number	Percent
Bachelor's Degree	16	47.1%
Master's Degree	6	17.6%
Doctoral Degree	2	5.9%

Knowledge

On the pre-test and post-test, participants were asked to read the following statements and choose the best answer. Questions 1 and 2 were multiple choice and statements 3, 4, 5, 6 are true false. Statements 3, 4, 6 were true while #4 was false.

		<i>Pre N=34</i>	Post
1.	Which of the following is not one of the six	21 (61.8%)	27 (64.7%)
	personal areas of vicarious trauma?	Missing: 7	Missing: 6
		(20.6%)	(17.6%)
2.	Burnout is characterized by: A. Emotional	29 (85.3%)	29 (85.3%)
	Exhaustion, B. Reduced feelings of personal	Missing: 5	Missing: 5
	accomplishment, C. Depersonalization, D. All of	(14.7%)	(14.7%)
	the Above		

3.	Secondary trauma has an effect on the	29 (85.3%)	29 (85.3%)
	workplace environment.	Missing: 5	Missing: 5
		(14.7%)	(14.7%)
4.	Vicarious trauma is a theoretical term that	27 (79.4%)	28 (82.4%)
	focuses on the covert cognitive changes that	Missing: 6	Missing: 5
	occur following cumulative exposure to another	(17.6%)	(14.7%)
	person's traumatic material.		
5.	There is no good way to measure burnout and	17 (50%)	18 (52.9%)
	secondary trauma.	Missing: 5	Missing: 5
		(14.7%)	(14.7%)
6.	Professionals exposed to trauma indirectly	27 (79.4%)	*26 (76.5%)
	through their work can have symptoms similar	Missing: 5	Missing: 6
	to PTSD.	(14.7%)	(17.6%)

^{*}Knowledge Scores Decreased

Self-Efficacy

Participants were asked to circle the statement that best fits them on a scale from "Not at all" 1, 2, 3, 4, 5 to "Very Much So" The percentages below are from those that answers were 4 or above.

	Pre	Post
1. I am comfortable making service referrals for	18 (53%)	*14 (41.2%)
traumatized children		
2. I know what to do to make service referrals to	8 (23.5%)	13 (38.3%)
the Center for Promoting Recovery and Resilience		
(CPRR)		
3. I am comfortable interacting with and working	14 (41.2%)	*12 (35.3%)
with traumatized children.		
4. I am committed to helping traumatized children	22 (64.7%)	*20 (68.9%)
to the extent that I am able.		

^{*}Self-Efficacy scores decreased.

Satisfaction

Twelve satisfaction questions were posed and were on a scale of 1 to 5 with 1 being "Not at All" and 5 being "Very much so".

	Mean (n=28)
1. This training increased my knowledge of the subject	3.46
2. This training increased my skills in this area.	3.43
3. Stated goals and learning objectives were met.	3.50
4. The information was delivered in an organized and understandable manner	3.82

5. The presenter was knowledgeable in this subject	4.18
6. This training increased my knowledge of the definition of trauma.	3.79
7. This training increased my knowledge of the types of trauma.	3.68
8. This training increased my knowledge of the effects of trauma.	3.82
9. This training increased my knowledge of the needs of traumatized children.	3.37
10. I would recommend this training to colleagues.	3.63
11. I am likely to use this training in my work.	3.64
12. This training is important for members of my field.	3.82
Composite Mean	44.14 out of 60 (n=28)

Training Summary
Educators/FRYSC
10:45 AM – 11:45 AM
Gheen's Academy

Eighty educators were trained in the following areas

- *Identifying youth in out-of-home-care*
- *Need to focus on educational stability*
- Supporting legislation
- Trauma definition and its effects on development and school success
- Community partnering
- *Tips for school transitions and work in the classroom*
- Compassion fatigue, burnout, and secondary (vicarious) trauma
- •Self-Care

A pre-test and post-test (see attached) were distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Demographics

Of the eighty participants, 56 (70%) completed a pre-test and post-test. Of the 56 participants that completed the demographic portion of the pre-test, 36 (64.3%) identified as Caucasian, 18 (32.1%) as Black/African American and 2 (3.6%) were missing. Participant's ages ranged from 28 to 67with the mean age being 47.5 years. The average amount of years participants reported working in this field was 17.45 years

thus it was an experienced group. Participants were also asked about their level of education:

Level of Education	Number	Percent
Bachelor's Degree	15	26.8%
Master's Degree	37	66.1%
Doctoral Degree	1	1.8%
Missing Information	3	5.4

Knowledge

On the pre-test and post-test, participants were asked to read the following six statements and indicate whether the statements are true or false. Statements 1, 2, 4, and 6 were true while 3 and 5 were false.

	Pre	Post
1. When a school transition becomes necessary,	Correct: 53	Correct: 55
appropriate open communication and records	(94.6%)	(98.2%)
transfer is important to a successful transition.	Missing 3	Missing 5
	(5.4%)	(8.9%)
2. Children and youth in out-of-home care	Correct: 39	Correct 55
experience about three foster care placement	(69.6%)	(98.2%)
changes per stay.	Missing 4	Missing 1
	(7.1%)	(1.8%)
3. The McKinney-Vento Homeless Assistance Act	Correct: 37	Correct: 49
does not apply to children in foster care.	(66.1%)	(87.5%)
	Missing 11	Missing 2
	(19.6%)	(3.6%)
4. Being in foster care contributes to a child's	Correct: 47	Correct: 54
traumatic stress.	(83.9%)	(96.4%)
	Missing 5	Missing 2
	(8.9%)	(3.6%)
5. There are two main ways the body uses	Correct: 4	Correct: 32
increased energy to respond to danger.	(7.1%)	(57.1%)
	Missing 7	Missing 2
	(12.5%)	(3.6%)
6. Giving children choices, maintaining routines	Correct: 51	Correct: 55
and preparing children for changes in routine are	(91.1%)	(98.2%)
helpful in responding to trauma exposure.	Missing 5	Missing: 1
	(8.9%)	(1.8%)

There were five multiple-choice knowledge questions on the pre-test and post-test. The following chart will note the percentages of correct answers in the pre-test and post-test.

	Pre	Post
1. The Uninterrupted Scholar's Act is intended to: A – Make it easier for case workers to get educational records	Correct: 17 (30.4%)	Correct: 39 (69.6%)
2. Youth in foster care have lower grade point averages and state test scores compared to youth not in care.	Correct: 41 (73.2%)	Correct 53 (98.2%)
3. Which of the following are effects of trauma exposure on children? D. All of the Above (poor impulse control, problems focusing, poor self-concept)	Correct: 50 (89.3%)	Correct: 55 (98.2%)
4. Which of the following is something you can do that will increase educational stability for children in out-of-home care? A - Make sure records get transferred	Correct: 22 (39.3%)	Correct: 25 (44.6%)
5. Burnout is characterized by: D – All of the above (emotional exhaustion, reduced feelings of personal accomplishment, depersonalization)	Correct: 51 (91.1%)	Correct: 52 (98.2%)

Self-Efficacy

Participants were asked to circle the statement that best fits them on a scale from "Not at All" to "Very Much So". The scores below indicate those who scored a "5" or "very much so"

	Pre "Very Much So"	Post "Very Much So:
1. I am comfortable making service referrals for traumatized children	40 (71.4%)	*35 (62.5%)
2. I know what to do to make service referrals to the PASS grant	2 (3.6%)	9 (16.1%)
3. I am comfortable interacting with and working with traumatized children.	24 (42.9%)	28 (50%)
4. I am committed to helping traumatized children to the extent I am able.	43 (76.8%)	*42 (75%)

^{*}Self-Efficacy scores decreased

Satisfaction

Twelve satisfaction questions were posed and were on a scale of 1 to 5 with 1 being "Not at All" and 5 being "Very much so".

	Mean
1. This training increased my knowledge of this subject	4.25
2. This training increased my skills in this area	3.91
3. Stated goals and learning objectives were met.	4.20
4. The information was delivered in an organized and understandable manner.	4.44
5. The presenter was knowledgeable in this subject.	4.71
6. This training increased my knowledge of the definition of trauma.	4.19
7. This training increased my knowledge of the types of trauma.	4.09
8. This training increased my knowledge of the effects of trauma.	4.16
9. This training increased my knowledge of the needs of traumatized children.	4.11
10. I would recommend this training to colleagues.	4.38
11. I am likely to use this training in my work.	4.33
12. This training is important for members of my field.	4.51
Composite Mean	51.28 out of 60 (n=55)

Training Summary PCC Workers, October 29, 2014 DCBS/L&N Building

Twenty-Two Private Childcare Center workers completed a questionnaire on the following areas:

- Capacity with which they work with traumatized youth
- •Prevalence of trauma and effects of trauma in childhood development
- Factors that are inclusive of trauma-informed treatment
- Factors foster youth experience academically

A pre-test and post-test (see attached) was distributed that collected demographic information, assessed knowledge, self-efficacy, and satisfaction with the presentation.

Of the 22 participants, 19 (86.4%) identified as female and 3 (13.6%) identified as male. In regards to race, 1(4.5%) identified as Black/African American and 21 (95.5%) as Caucasian. Participants' ages ranged from 27 to 61 with the mean age being 44 years. The average number of years participants reported working in their field was 17 years, thus it was an experienced group. Participants were also asked about their level of education and all 22 (100%) had a Bachelor's or Master's degree.

Level of Education	Number	Percent
Bachelor's Degree	5	22.7
Master's Degree	17	77.3
Total	22	100.0

Knowledge

On the pre-test and post-test, participants were asked to read the following six statements and indicate whether the statements are true or false. Statements 1,3,4,6 were true while 2 and 5 were false.

	Pre	Post
1. As many as half of the youth in foster care do not complete high school.	Correct: 17 (77.3%)	Correct: 22 (100%)
2. When a school transition becomes necessary, appropriate open communication and records transfer is not all that important to a successful transition.	Correct: 21 (95.5%)	Correct 20 (90.9%)
3. Maltreatment is associated with significant delays in school-age children.	Correct: 21 (95.5%)	Correct: 22 (100%)
4 Trauma-informed therapy is necessary for youth who have experienced a traumatic event.	Correct: 19 (86.4%)	Correct: 21 (95.5%)
5. An advocate is someone who ignores the cause of another.	Correct: 22 (100%)	Correct: 22 (100%)
6. One factor of educational success is the stability of the educational placement.	Correct: 22 (100%)	Correct: 22 (100%)

There were five multiple-choice knowledge questions on the pre-test and post-test. The following chart will note the percentages of correct answers in the pre-test and post-test.

	Pre	Post
1. A trauma-informed child welfare system: D All	Correct: 22	Correct: 21
of the Above (Understands the impact of	(100%)	(95.5%)

trauma, Integrates understanding into planning, Understands his/her role)		
2. Youth in foster care have lower grade point averages and state test scores compared to youth not in care.	Correct: 22 (100%)	Correct 22 (100%)
3. Which of the following is NOT an effect of trauma exposure on children? B Positive Self-Esteem	Correct: 19 (86.4%)	Correct: 19 (86.4%)
4. Which of the following is something you can do that will increase educational stability for children in out-of-home care? B Recruit foster parents from within your school.	Correct: 5 (22.7%)	Correct: 3 (13.6%)
5. Some important advocacy strategies are: D All of the Above (Be organized, Avoid "us" versus "them", Be persistent, don't take "no" easily)	Correct: 22 (100%)	Correct: 22 (100%)

Self-Efficacy

Participants were asked to circle the statement that best fits them on a scale from "Not at All" to "Very Much So". The scores below indicate those who scored a "5" or "very much so"

	Pre "Very Much So"	Post "Very Much So:
1. I can recognize the different ways trauma can impact educational success.	14 (63.6%)	17 (77.3%)
2. I understand how the PASS grant works to help foster youth succeed in school.	1 (4.5%)	7 (31.8%)
3. I am comfortable interacting with and working with traumatized children.	16 (72.7%)	18 (81.8%)
4. I am committed to helping traumatized children to the extent I am able.	20 (90.9%)	20 (90.9%)

Satisfaction

Twelve satisfaction questions were posed and were on a scale of 1 to 5 with 1 being "Not at All" and 5 being "Very much so".

		Mean
1.	I can recognize different ways trauma can impact	4.73
	educational success.	
2.	I understand how the PASS grant works to help foster youth	4.09

succeed in school.	
3. I am comfortable interacting with and working with traumatized children.	4.73
4. This training increased my knowledge of this subject	3.86
5. This training increased my skills in this area	3.64
6. The information was delivered in an organized and understandable manner.	4.14
7. The presenter was knowledgeable in this subject.	4.31
8. This training increased my knowledge of the definition of trauma.	2.86
9. This training increased my knowledge of how trauma can affect school performance	3.73
10. This training increased my knowledge of the effects of trauma.	3.23
11. This training increased my knowledge of the needs of traumatized children.	3.41
12. I am likely to use this training information in my work.	3.86
13. This training is important for case managers.	4.5
Composite Mean	51.09 out of 65 (n=22)

PASS

Pathway for Academic Stability and Success

Program Manual for Educational Support for Youth in Foster Care



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Overview: PASS Program

The overall purpose of the Jefferson County, Kentucky's Pathway for Academic Stability and Success (PASS) project is to promote academic stability and success of foster youth in 6th through 8th grade at risk for dropping out of school. This project is a partnership between The Kent School of Social Work, University of Louisville in partnership with Kentucky Department for Community Based Services, Jefferson County Public Schools, Family and Children's Place, Kentucky Department of Juvenile Justice, and Louisville Metro Health Department.

The project focuses on assessing and developing interagency infrastructure and coordination which enables the partners to more effectively respond to the educational needs of youth in care, and tracking and addressing the needs of the youth through the work of Educational Navigators who coordinate the work of representatives of the partner agencies to promote educational stability and success for individual youth.















Introduction

The educational needs of youth in foster care have largely gone unrecognized in this country, yet the impact of the foster care experience on educational achievement can be significant. Numerous studies and reports repeatedly list the following education issues for children involved with the child welfare system:

- · Frequent school placement changes
- Lower standardized achievement test scores
- A greater dropout rate than non-foster youth
- Placement in special education programs, generally related to either a learning disability or an emotional disturbance.

Addressing these issues requires a concerted effort of the child welfare, educational, judicial and mental health systems. Educating classroom teachers, school administrators and other staff to the academic challenges these youth encounter is a crucial part of this partnership effort.



Background: Legislation

Federal Legislative Mandates are currently in existence pertaining to foster care youth and educational stability; however not all are being given the attention they deserve. Through the Pathways to Academic Stability and Success (PASS) program, we aimed to address many of the legislative mandates by addressing the goals and objectives of relevant Federal legislation contained in the Adoption Opportunities Program, Section 203 (42 U.S.C. 5113) of the Child Abuse Prevention and Treatment and Adoption Reform Act of 1978, (Pub.L. 95-266), as amended by the Keeping Children and Families Safe Act of 2003 (Pub.L. 108-36) and the CAPTA Reauthorization Act of 2010 (Pub.L. 111-320).



Keeping Children and Families Safe Act of 2003

Our goal of greater collaboration between helping agencies fell into line of supporting the Keeping Children and Families Safe Act of 2003. This Safe Families Act has two provisions that are directly applicable to this grant application as it relates to creating interagency collaborations: 1) supporting and enhancing interagency collaboration between the child protection system and the juvenile justice system for improved delivery of services and treatment, including methods for continuity of treatment plan and services as children transition between systems; and 2) supporting and enhancing collaboration among public health agencies, the child protection system, and private community-based programs to provide child abuse and neglect prevention and treatment services (including linkages with education systems) and to address the

health needs, including mental health needs, of children identified as abused or neglected, including supporting prompt, comprehensive health and developmental evaluations for children who are the subject of substantiated child maltreatment reports (U.S. DHHS, 2012b).

Child Abuse Prevention and Treatment ACT (CAPTA) Adoption Opportunity Program (AOP)

The Child Abuse Prevention and Treatment Act (CAPTA) is one of the key pieces of legislation that guides child protection. CAPTA, in its original inception, was signed into law in 1974 (P.L. 93-247). It was reauthorized in 1978, 1984, 1988, 1992, and 1996, and with each reauthorization, amendments have been made to CAPTA that have expanded and refined the scope of the law. The 1978 CAPTA reauthorization also houses the Adoption Opportunities Program (AOP), Section 203 (42 U.S.C. 5113).



The Adoption Opportunity Program (AOP) provides funds for projects designed to eliminate barriers to adoption and help find permanent families for children who would benefit from adoption, particularly children with special needs. One of the AOP's major program areas, as mandated by the legislation, is the development and implementation of national adoption and foster care data gathering and analysis and the development and implementation of a national adoption information exchange system. One of the main goals of the PASS Project was to develop a data gathering and information sharing exchange system on the local level in hopes of greater collaboration and continuity of care for our youth in foster care.

One provision of The CAPTA Reauthorization Act of 2010 directly relates to Child Protective Service practices that promote homeless children's school attendance. Most of the country's homeless youth are under age 18. Many have left home due to abuse or neglect, or because their parents abandoned them or pushed them out due to, for example, disapproval of their emerging sexual identity. Some have lived on the streets for some time because they wish to be "on their own." This provision now requires states to assure or

certify to DHHS that they have programs and training for CPS personnel that address the "unique needs of unaccompanied homeless youth, including access to (school) enrollment and support." This provision appears to have been included because of concerns that a homeless youth's abuse or neglect at home, when reported to CPS, can disrupt the youth's school attendance and stability. Such disruptions are contrary to the intent of the 2008 Fostering Connections Act and the McKinney-Vento Homeless Assistance Act (Davidson, 2011).

McKinney-Vento Homeless Assistance Act

The McKinney-Vento Homeless Assistance Act is an important vehicle that provides



educational stability to many children across the country. Youth who are awaiting foster care placement are listed under the definitions here for "homeless". The Act currently helps to reduce the barriers that eligible children face in terms of enrolling, attending and succeeding in school. Currently, some children in out of home care are eligible for the benefits

of the McKinney-Vento Act. Students eligible under the McKinney-Vento Act (including some out of home care students) are entitled to numerous specific educational rights and benefits such as educational stability (i.e., allowed to stay in original school even when they move to a foster placement in a different school district), immediate school access, an educational liaison at school and Title I eligibility (National Working Group on Foster Care and Education, 2007).

Fostering Connections to Success and Increasing Adoptions Act of 2008 (Pub.L. 110-351)

Fostering Connections to Success and Increasing Adoptions Act requires child welfare and education systems to collaborate with the goal of improving educational outcomes for children in foster care (Gustavsson & MacEachron, 2011). It requires states to create education stability plans for all children in foster care. Those plans must include three assurances that:



- 1) Foster care placements take into account the appropriateness of a child's educational setting and proximity to the school in which the child is enrolled at the time of placement
- 2) Children remain in the school they were attending at the time of placement (unless it is not in their best interest) even if they move away from that school's boundaries
- 3) When it is not in the best interest to remain in the original school, children are immediately enrolled in a new school with all educational records to follow them in an expeditious manner (Flango & Sydow, 2011).

Background: Research

PASS is grounded in research related to factors contributing to challenges to educational stability, and success in foster youth based on their experiences of trauma and instability prior to coming into care (i.e. Bass, Shields, & Behrman, 2004; Saltzman et al., 2001). In addition, the approach proposed takes into account the impact of systemic challenges inhibiting educational performance including placement disruptions and school moves (e.g. The Center for Human Services, 2008; Zetlin, MaLeod, & Kimm, 2012), and the delay of records transfer, and lack of learning supports in the schools that are responsive to the unique needs of youth in Out-Of-Home Care (Zetlin & Weinberg, 2004).

PASS is based on promising strategies gleaned from the literature for responding to these challenges. We know that it is critical to build protective factors in these youth that will enable them to progress in the development of social, educational and behavioral well-being. This project builds on the evidence that educational connectedness is associated with academic success and warding off adverse peer experiences (e.g. Decataldo, 2009). Establishing opportunities for experiencing educational success has been demonstrated as a mediating factor related to the influence of trauma and placement instability (e.g. Casey Family Programs, 2007). Concerted efforts by



caregivers, child welfare workers and education personnel to encourage academic performance has been deemed important (Martin & Jackson, 2002). Educational liaisons, similar to PASS's Educational Navigators, can improve educational outcomes (Zetlin, Weinberg, & Shea, 2010).



The efforts of collaborating partners on an inter-organizational level as well as in the collaborative response to the needs of individual youth served will focus on implementing this promising approach.

PASS is consistent with suggestions for improving educational stability reported in the research literature. Encouraging school connectedness is one proven way to decrease school dropout rates. Educational research with general population students has shown that those students who feel connected to their schools are more likely to succeed academically, more likely to graduate, less likely to be truant or involved in fighting, bullying, and vandalism and less likely to become pregnant (Lonczak et al., 2002; Samdal et al., 1998; Schapps, 2003; Wilson & Elliot, 2003). Karcher (2005; 2010) has emphasized school connectedness as a central motif in his research and practice on cross-age peer mentoring and its efficacy in mitigating risk factors for juvenile delinquency. Increasing educational stability is tied to encouraging school connectedness and must be emphasized for foster care children (Decataldo, 2009).

PASS incorporates strategies that are more likely to lead to educational success. Educational success presents a potential counter-measure to protect against the effects of traumas such as abuse, neglect, separation and lack of placement permanency coupled with uncertainty, confusion and fear foster children have experienced in foster care (Casey Family Programs, 2007). School experiences that are positive can improve foster care youth's well-being, assist them with smoother transitions to adulthood and enhance the likelihood that they can contribute positively to society, attain economic self-sufficiency and achieve personal fulfillment (Casey Family Programs, 2007). Enhancing foster children's academic achievement will yield increasing graduation rates, resulting in lowered crime and incarceration rates and increased economic activity (Vacca, 2004). Support and encouragement by foster parents, social workers and teachers for academic achievement among foster care youth is highly important (Martin & Jackson, 2002). Foster children with stable relationships with consistent caregivers perform better academically and on achievement tasks and are less likely to repeat a grade or drop out of school (Epstein, 1991; Fehrmann et al., 1987). School placement stability is essential to successful educational outcomes for foster care youth (Flango & Sydow, 2011). The use of an educational liaison (our Educational Navigators) may help improve educational outcomes of children in foster care (Zetlin, Weinberg, & Shea, 2010; 2006).

PASS & Academic Success

Our project contributes toward achieving the above legislative goals by creating an intersection of these federal statutes. The Pathway for Academic Stability and Success (PASS) interagency team works together to gain guidance regarding what needed to be done to comply with federal requirements and promote the positive educational outcomes for youth in care. The partnering organizations have come together to attain a level of collaboration that worked in favor of a foster youth's best interest.

Promotion of academic stability and success of foster youth at risk for dropping out of school hinges on addressing a set of practice and inter-organizational barriers identified in in the literature which have also been observed related to foster youth our local community. Barriers we identified were as follows:

- ongoing behavioral and emotional problems due to past abuse and neglect-induced trauma which impact educational engagement and performance
- stigma and discrimination associated with "being" a foster youth
- lack of emotional and behavioral connectedness to school



- placement instability and concomitant school disruption
- lack of availability as well as appropriateness of education programs responsive to the needs of these youth
- systemic insufficiency in tracking academic progress and portability of school records
- inconsistent monitoring of, accountability for, and advocacy regarding youths' educational plans

- ineffective cross-systems communication and information exchange due to interpretation of confidentiality rules
- fragmented interagency collaboration/coordination within systems of care because of isolating policies, procedures, and practices.

PASS works to address these barriers in three main ways:

- Assessing challenges and implementing strategies to improve cross-systems collaboration related to the promotion of educational stability and success of foster youth
- Implementing a coordinated response to identified needs of individual youth in the foster care system
- Utilizing a targeted approach to tracking the implementation of educational plans and indicators of educational stability and success for individual youth in the target population so that a collaborative community response is evidence-informed, with our overall goal being to increase academic stability and success of foster youth in 6th through 8th grade at risk for dropping out of school.

PASS Components

To get started, a participating group could use the following stages to set up an infrastructure and recruit youth in foster care through the local child services agency. The help of Educational Navigators is useful for facilitating the interventions and to ensure that needed services and programs are being implemented in the schools by using the ABCDE Guide during home and school visits.

Component 1: Build Infrastructure

Establish a Project Steering Committee (PSC) of key players in the community –
 those in positions higher up in organizations with which you will work.

- Key players may include: Department of Social Services or Child Protective Services, local school system, court administrator,
 Department of Juvenile Justice, therapeutic agency, public health.
- Under the direction of the PSC, set up workgroups to review and make recommendations for changes to existing policies and practices.
- Based on recommendations from workgroups and Program Steering Committee
 (PSC), the project team can build and establish infrastructure and capacity including:
 - Establishing policies and procedures within and across systems of care
 - Strengthening cross-system communications, information exchange,
 and data sharing/exchange plan
 - Establishing a protocol for monitoring and tracking foster youth's academic progress and school record
 - Educate foster youth, foster parents, teachers and providers on foster youth's education needs and achieving stability and success in school
 - Identify, review, change (if necessary) practices including developing screening protocols/checklist for referral sources, implement appropriate assessment, intervention, case management services, and identify indicators of academic stability and success.

Component 2: Implement Infrastructure

Implement the new infrastructure-Pathway for Academic Stability and Success (PASS) by:

- Establishing Educational Navigators for each foster youth
- Review existing educational plan
- Identify gaps in educational plan/progress and barriers contributing poor academic stability and success
- Assemble relevant professionals/service providers to critically review/analyze gaps in educational plan/progress and barriers contributing poor academic stability and success

- Conduct educational assessments on appropriate foster youth
- Conduct assessment and/or refer to services for problems that are hindering educational success
- Link foster youth with appropriate educational services and related psychosocial services (as needed)
- Track & monitor foster youth's educational progress and school stability and success plan
- Provide feedback to PSC and workgroups on areas of concern as it relates to implementation of PASS.

Component 3: Decision Making: ABCDE Guide

The ABCDE Guide has been found to be a useful approach/tool to help Educational Navigators organize case material for discussion, analysis, and decision making. Using the ABCDE guide requires engaging in a process with the following steps: **A**cquire Information, **B**rainstorm explanations & potential solutions, **C**ritically analyze & prioritize potential solutions, **D**evelop & implement best solution(s), and **E**valuate, modify and reflect on the solutions implemented.



➤ **ACQUIRE Information:** (Identify, gather, and critically review the information and facts), the focus is to generate the sharpest understanding of the problem/issue, by shifting through all the facts/information presented, and settling on the most relevant information, and if necessary generating more questions to bring the problem/issue into clearer focus.





- > **BRAINSTORM**-ing: (for underlying themes, issues, as well as explanations for the situation/problem being experienced), the focus is on generating ideas about how the facts/information are interrelated or connected, can be explained, underlying causes proposed. Themes are articulated and reasons for selection of those themes are provided.
- CRITICALLY ANALYZE & PRIORTIZE: (potential solutions) solutions are generated and critically analyzed to see if they have any connection to addressing the problem and themes identified.
 - Also, from a pragmatic perspective, are the proposed solutions able to be implemented and realistic. A companion set of questions can be asked that encourage critical analysis. Examples: Do the solutions address the problem/issue? Are the solutions legal? Consistent with standards of practice? best practice? informed (evidence-based) practice? Ethical? Consistent with values, beliefs, mission, policies, goals/objectives of the organization?
- ➤ DEVELOP & IMPLEMENT A PLAN: the challenge is to examine plans to be sure they reflect the needs identified. In regards to the plan, a review needs to focus on what are the inputs (resources needed)? Activities (which tasks that will need to be performed), outputs (who, what, how, when, where plan will impact) and outcomes (the actual changes-in quality) expected? Additionally, identify the skill and knowledge sets needed by the worker to fulfill the plan of action. And ask: Is the plan Specific, Measureable, Adaptable to circumstances, Realistic, Time based, and consistent with agency values, goals.



Work in progress!!



EVALUATE, REFLECT, AND IF NECESSARY, MODIFY &

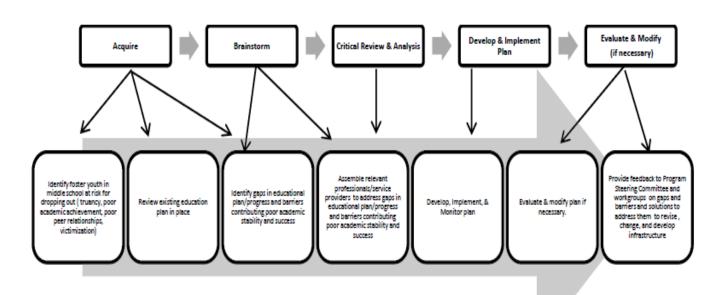
CHANGE: emphasis is on helping to determine whether the proposed solutions are working or need to change, and acquiring the necessary information to do so, and so on.

For any one youth, specific application of the model PASS involves, for example:

- Identify foster youth in middle school at risk for dropping out (truancy, poor academic achievement, poor peer relationships, victimization)
- Review existing education plan in place
- Identify gaps in educational plan/progress and barriers contributing poor academic stability and success
- Assemble relevant professionals/service providers to critically review/analyze gaps in educational plan/progress and barriers contributing poor academic stability and success
- Develops Implement, & Monitor Academic Stability and Success plan
- Evaluate & modify plan if necessary
- Provide feedback to Program Steering Committee and work-group on gaps and barriers and solutions to address them to revise, change, and develop infrastructure.

The diagram below shows how the ABCDE decision making guide can be applied step by step by the Educational Navigator to the issue of managing and monitoring foster youth's educational progress and plan.

Pathway to Academic Stability and Success (PASS) Educational Navigator Practice Model



Foster Youth Served

Navigator Report 9/23/13

- 41 Youth referred
- 18 Active involvement
- 12 Ineligible (Non Jefferson County, Hospitalization)
- 6 Awaiting information from worker
- 2 Relative Placement
- 2 Return Home
- 1 AWOL

Demographics

- 4 Sixth graders
- 6 Seventh graders
- 3 Eighth graders
- 5 Ninth Graders

Race/Ethnicity

- 51% Caucasian
- 44% African American
- 5% Biracial

Schools Served

Butler High SchoolCarrithers Middle SchoolCentral High SchoolConway Middle SchoolFarnsley Middle SchoolFern Creek High SchoolJeffersontown High SchoolMeyzeek Middle SchoolMyers Middle SchoolOlmstead Middle School

Stuart Middle School Thomas Jefferson Middle School

Waller Environmental Middle Westport Middle School

Activities with youth and foster families

Rapport building, school and home visits, court appearances, locating educational resources Barriers/Challenges

School records, Connecting with workers, Placement disruptions, Delay in obtaining referrals **Successes**

Client has resumed visitation with her son and working toward reunification

Client returned home and no truancy issues thus far

U of L Empowerment Day

Advocated for client to remain in home school

Navigator Report 2.25.14

- 82 Youth referred
- 25 Active involvement
- 25 Ineligible (Non Jefferson County, Hospitalization)
- 12 Awaiting information from worker
- 16 Relative Placement
- 4 Return Home

Demographics

- 4 Sixth graders
- 9 Seventh graders
- 7 Eighth graders
- 5 Ninth Graders

Race/Ethnicity

- 47% Caucasian
- 51% African American
- 2% Biracial

Schools Served

Butler High School
Central High School
Central High School
Farnsley Middle School
Jeffersontown High School
Kennedy Middle School
Meyzeek Middle School
Myers Middle School
Olmstead Middle School
Olmstead Middle School

Stuart Middle School Thomas Jefferson Middle School Waller Environmental Middle Westport Middle School

Activities with youth and foster families

Rapport building, school and home visits, advocating for trauma informed consequences

Barriers/Challenges

Connecting with workers, Placement disruptions, foster parent contact

Successes

Participation in ARC meetings

Attending board referral meetings (Dawson Orman)

Access to client school records

Navigator Report 4.7.14

- 82 Youth referred
- 23 Active involvement
- 25 Ineligible (Non Jefferson County, Hospitalization)
- 12 Awaiting information from worker
- 16 Relative Placement
- 4 Return Home
- 2 Residential Placements

Demographics

- 4 Sixth graders
- 9 Seventh graders
- 7 Eighth graders
- 5 Ninth Graders

Race/Ethnicity

- 47% Caucasian
- 51% African American
- 2% Biracial

Schools Served

Butler High School Carrithers Middle School Central High School Conway Middle School Farnsley Middle School Fern Creek High School Kammerer Middle School Jeffersontown High School Kennedy Middle School Lassiter Middle School Meyzeek Middle School Moore Middle School Myers Middle School Olmstead Middle School Stuart Middle School Thomas Jefferson Middle School TT Knight Middle School

TT Knight Middle School
Waller Environmental Middle
Westport Middle School
Waller Environmental Middle
St. Joseph Children's Home
Home of the Innocents
Southern High School

Activities with youth and foster families

Rapport building, school and home visits, advocating for trauma informed consequences **Barriers/Challenges**

Connecting with workers, Placement disruptions, foster parent contact

Successes

Participation in ARC meetings

Attending board referral meetings (Dawson Orman)

Access to client school records

Navigator Report 10.13.14

Youth referred 116

- 21 Active involvement
- 1 AWOL
- 62 Ineligible (Non Jefferson County, Hospitalization)
- Awaiting information from worker
- Relative Placement 18
- Return Home 6
- 7 Higher Level of Care (Residential Placements)

Demographics

- 1 Sixth graders
- 4 Seventh graders
- 6 Eighth graders
- 7 Ninth Graders
- 3 Tenth Graders

Race/Ethnicity

80% African American

17% Caucasian

3% Biracial

Schools Served

Butler High School Carrithers Middle School Central High School Conway Middle School Farnsley Middle School Fern Creek High School Jeffersontown High School Kammerer Middle School Kennedy Middle School Lassiter Middle School Meyzeek Middle School Moore Middle School Myers Middle School Olmstead Middle School

Stuart Middle School Thomas Jefferson Middle School TT Knight Middle School Waller Environmental Middle

Westport Middle School

Activities with youth and foster families

Coordinating implementation of IEP plans and/or evaluations for IEP plans

Barriers/Challenges

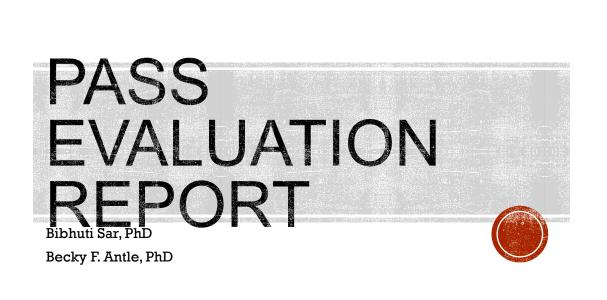
Placement Disruptions, information transferring to new schools/placements

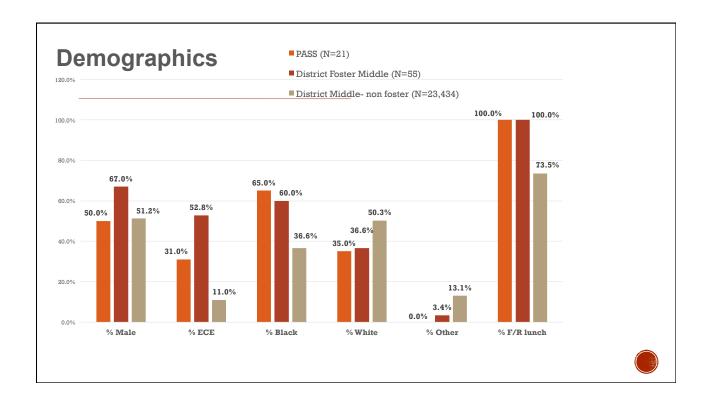
Successes

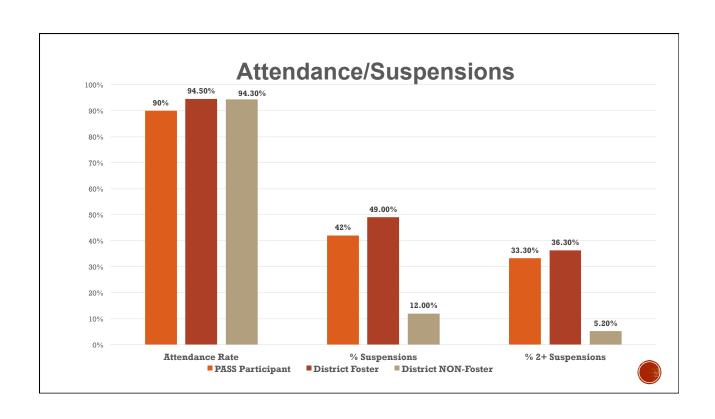
Participation in ARC meetings

Rapport with schools

Access to client school records





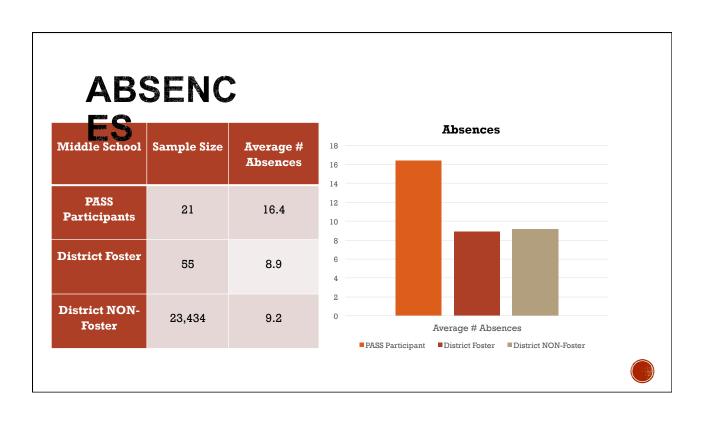


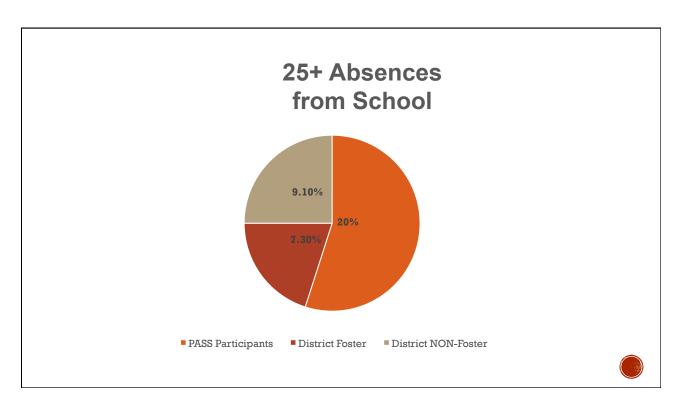
Behavior Referrals

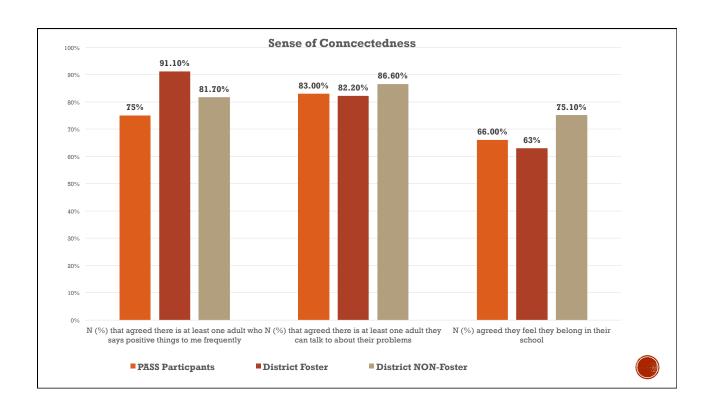


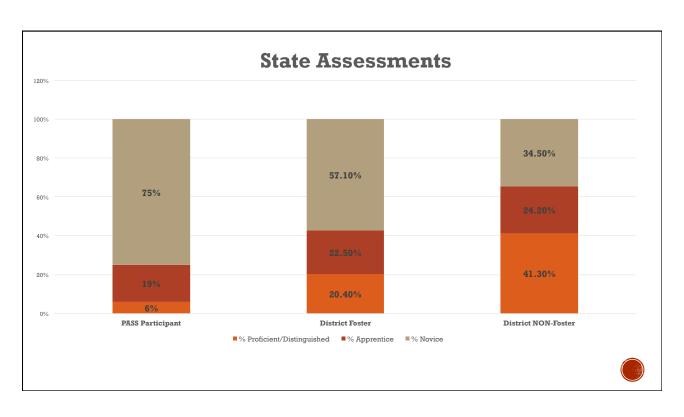
Middle School	Sample Size	Number of Referrals
PASS Participants	21	34
District Foster	55	52
District NON-Foster	23,434	30,787









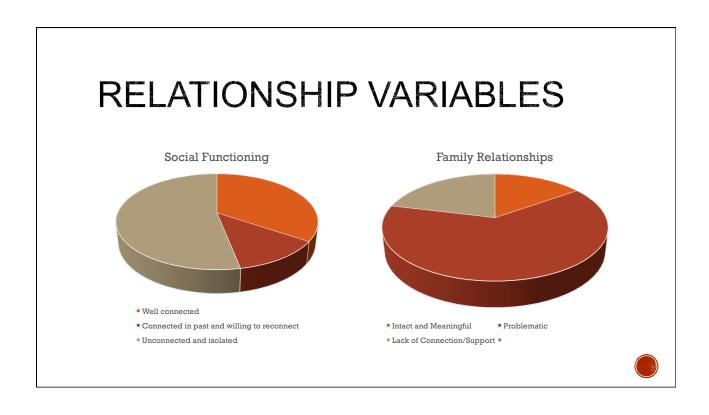


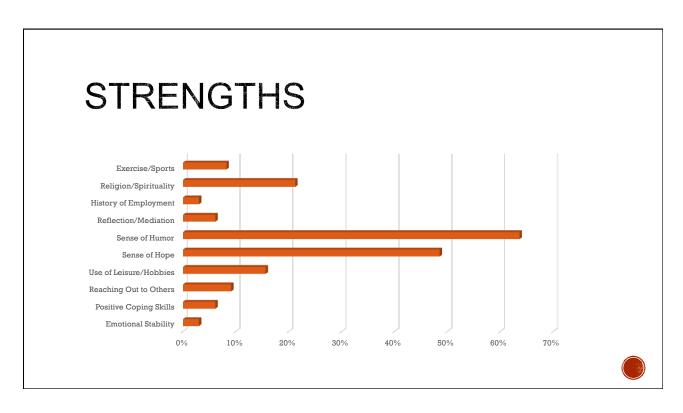


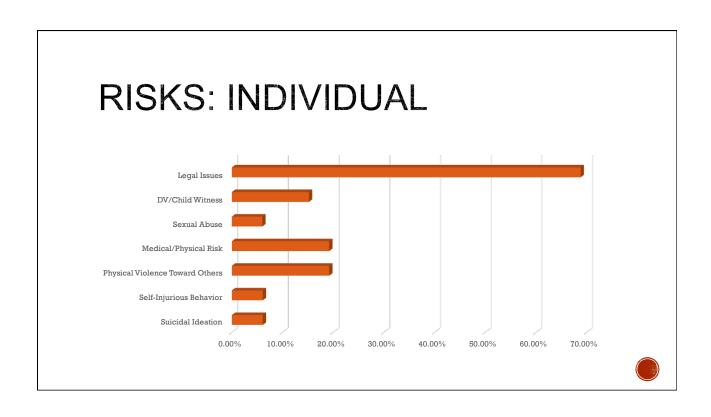
DEMOGRAPHICS

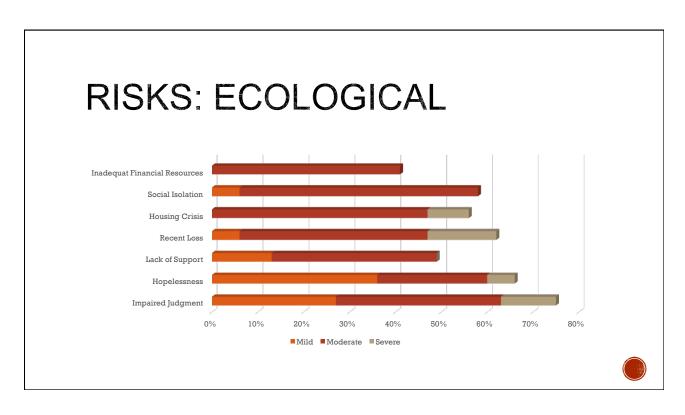
- Sample Size = 39
- Race
 - 59% AA, 33% Caucasian, 8% other
- Gender
 - 59% male, 41% female
- Age 13.05



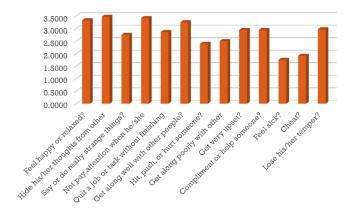








BEHAVIOR RATING INDEX FOR CHILDREN (BRIC)

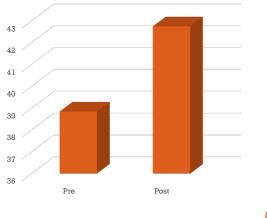


- Behaviors reported on a 1 to 5 scale
 - l=never
 - 5=always



SCHOOL ENGAGEMENT SCALE

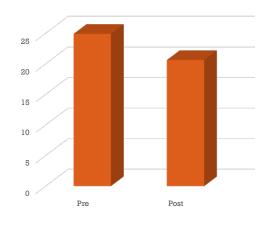
- Sample Items
 - · Pay attention in class
 - I follow the rules at school
 - I feel excited by the work in school
- Mean Scores
 - Pre-Intervention: 38.84
 - Post-Intervention: 42.74





CHILD PTSD SYMPTOM SCALE

- Sample Items
 - Having upsetting thought or images about the event that came into your head when you didn't want them to
 - Having bad dreams or nightmares
 - Acting or feeling as if the event was happening again
- Mean Scores
 - Pre-Intervention: 24.89
 - Post-Intervention: 20.61





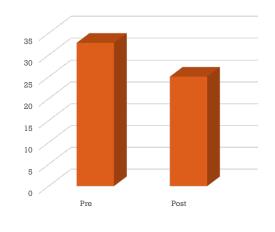
ROSENBERG SELF ESTEEM SCALE

- Sample Items
 - On the whole, I am satisfied with myself
 - At times, I think I am no good at all
 - I feel that I have a number of good qualities
- Mean Scores
 - Pre: 22.1
 - Post: 20.9



TRAUMA SYMPTOM CHECKLIST FOR CHILDREN

- Sample Items
 - Feeling afraid something bad might happen
 - Scary ideas or pictures just pop into my head
 - Going away in my mind, trying not to think
- Mean Scores
 - Pre: 32.79
 - Post: 25.05





EDUCATIONAL OUTCOMES

- Correct grade level 89.7%
- Truant 3.4%
- **ELL** 3.3%
- IEP 46.7%
- Number of schools attended 2012-2013 = 1.5
- Number of schools attended 2013-2014=1.9
- Number of absences 1.85
- Number of disciplinary referrals 3
- Number of in school suspensions 1.33
- Number of out of school suspensions .79
- GPA 2.18





THEMES FROM INTERVIEWS: FOSTER PARENTS

- The system has many flaws
- Some DCBS workers are easier to reach than others
- Need support of DCBS in the home. Instead of telling children ways they can not discipline, support their role of authority. Need to be able to discipline.
- Not all homes are good so DCBS should do surprise visits to check on parents and youth behavior. Close homes that are harmful.
 - Many children have learned how to work the system—make false allegations
 - Need DCBS or navigator position to back them up—very helpful function of this project
- Group homes tend to have a very negative effect on children
- Schools need to avoid passing children who can't read, write, do basic math. Not benefiting anyone. Not just foster children—all children.
- Many youth have low self-esteem related to school and need support and positive encouragement.



THEMES FROM INTERVIEWS: DCBS WORKERS

- Law to keep in schools but always make theme change
- Limited information shared by schools. Not invited to meetings unless go to school and introduce self. No idea of behavior problems (referrals) until suspended or an emergency.
 - If suspended, always referred for a safe and drug free school assessment with same result
 —go to counseling.
 - Foster parents also have no idea what is going on in school.
- When teachers know CPS involved, want them to do things school social workers or teachers should be doing like reaching out to parents
 - Limited effort by teachers to reach out to parents
- Very helpful to have navigators to work with children and schools, obtain necessary information and alert when there is a problem. Critical advocacy role.





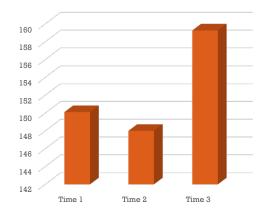
WILDER COLLABORATION SCALE

Sample Items

- I have a lot of respect for the other people involved in this collaboration
- The people involved in our collaboration represent a cross section of those who have a stake in what we are trying to accomplish
- My organization will benefit from being involved in this collaboration

Mean Scores

- Time 1 (September 2013): 150.11
- Time 2 (April 2014): 148.00
- Time 3 (August 2014): 159.27







WHAT ARE THE PROGRAMMATIC/POLICY CHANGES THAT ARE NEEDED TO MAKE OUR EFFORTS TO SUPPORT THE EDUCATIONAL OUTCOMES OF YOUTH IN FOSTER CARE SUCCESSFUL?

- Resolve new issues with JCPS not allowing foster children as "homeless" (CHFS)
- Gain judges use of our developed court order (CHFS)
- Leadership involvement in breaking down silos (DCBS)
- School stability supports including transportation (DCBS)
- Including school reps in facilitated staffings at removal and placement change (DCBS)
- Court order for ECE children make sure it's correct (JCPS)
- Foster parents need a way to communicate with school counselors regarding educational needs and the authority to advocate for them. (FCP)
- Court language and legal information necessary for foster parents to serve as educational representatives (ICPS)
- KDE's new guidelines regarding McKinney Vento services limits our ability to provide support for foster students (JCPS)
- Educational Passport to follow each foster care youth to ensure that the service providers can advocate for them (FCP).



WHAT ARE FACTORS THAT PROMOTE THE ACADEMIC SUCCESS OF THESE YOUTH IN CARE?

- Collaboration and communication between all parties (CHFS)
- Stable placement; early assessment of academic needs; engagement with school staff; mentor, caregiver involvement; focus of long term goals for youth and information and support in reaching goals (DCBS)
- Consistently communication with school, foster parent and outside agencies (JCPS)
- Caregiver or worker who takes interest in their well-being; support within school system (FCP)
- Established rapport/connections; stability of services not a lot of relocations; trainings and awareness occurring (JCPS)
- Increase school stability; foster parents need to have more access to student records (JCPS)
- Building relationship with the youth; advocating for services for the youth; collaboration with other service providers (FCP)



WHAT ARE FACTORS THAT ARE BARRIERS TO ACADEMIC SUCCESS FOR THESE YOUTH IN CARE?

- Mental health issues (CHFS)
- All parties not working in partnership and collaboratively (CHFS)
- Moves; miscommunication/lack of communication; lack of remedial support; lack of knowledge of trauma of removal and moves (DCBS)
- Moving from foster care home to foster care home, paperwork not following them, needs not being met (JCPS)
- Multiple disruptions, trauma history (FCP)
- Movement to different homes/schools; expedition in exchange of information/lack of; legal jargon; available funding for resources (JCPS)
- High mobility (JCPS)
- Collaborating with service providers (FCP)



IN WHAT WAYS HAS THE PASS PROJECT IMPACTED YOUR AGENCY?

- Promoted and increased collaborative work with JCPS; increased focus on children in out-of-home-care educational needs; aided in identifying unmet educational needs in our children. (CHFS)
- Educational assistance with youth in care; communication with school system; identifying issues (DCBS)
- Made aware of specific needs of foster children; court order document (JCPS)
- Opened our eyes to the multiple areas of concern that foster families encounter in the school system (FCP)
- Increase awareness of issues that foster care face; impacted homeless program's practice (JCPS)
- More of the Homeless Education Program is being impacted by KY Dept. of Ed. which restricts our department from providing services from foster care students. (Homeless office)
- The Educational Navigators are employed at F&CP. The Navigator's were able to identify
 educational gaps in the foster youth's educational plans (FCP)
- Connected foster care students with the homeless office and supports available to these students and their families; infinite campus tabs and updates (JCPS)



IN WHAT WAYS WILL YOU HELP YOUR AGENCY CONTINUE THE WORK WE HAVE BEGUN WITH PASS?

- Promote and increase collaborative work with JCPS; increase focus on children in outof-home-care educational needs; aide in identifying unmet educational needs in our children. (CHFS)
- Attend Steering Committee; meet with JCPS managers to address issues; meet with PCCs to increase involvement in youth academic success (DCBS)
- Monitoring of foster children through Infinite Campus (JCPS)
- Continue to follow up with current clients as well as offer trauma treatment to PCCs (FCP)
- Continue developing resources for foster care students in Homeless Program; sharing concerns with JCPS's leadership (JCPS)
- Providing Housing Instability week advocating for foster students (Homeless office)
- Continue to be the Educational Navigator (FCP)
- Continue the connections with resources for student support (JCPS)



SUMMARY

- Youth survey data shows improvements in areas of trauma and school engagement, as well as key areas of strength and risk to be addressed for the target population
- Collaboration scores improved over the course of the project
- Interviews supported the important role of navigators in obtaining/exchanging information and advocating for children
- Steering committee qualitative feedback provides helpful insights into success factors, barriers, additional changes needed, impact of the project and ways to continue/sustain these efforts by various agencies





A FOCUS ON FOSTER CARE

Kent School of Social Work

U₀F_

Proposal

Staff position to focus on JCPS' foster youth

This proposal is rooted in the strong belief and understanding that there is a great need for child welfare and education agencies to improve educational stability and permanency outcomes for middle- to high-school aged children in child welfare.



Educational Instability



Educational instability is part and parcel of the foster care experience for many foster care youth •

> Experience on average one or two foster care placement changes per

Frequent school changes are associated with an increased risk of being retained a grade in school and of repeated behavior problems $^{\circ}$

Multiple placement disruptions contribute to foster children's further trauma and damage to their social, emotional and cognitive $\text{development } \mathcal{I}$

- Burley & Halpern, 2001; Courtney, Dworsky, & Pollack, 2007
 Trout et al., 2008; Wood et al., 1993
- / Harden, 2004; The Center for Human Services, 2008

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Bigger Picture

Compared to non-foster peers . . .

Higher rates of absenteeism Truancy Grade retention Lower graduation rates Higher risk for poor educational attainment More likely to drop out

Foster youth in public schools score 16-20 percentile points below non-foster youth in statewide standardized testing

On average - read at only a 7th grade level after completing their Junior year.





PASS Involvement

Since our project, Pathway to Academic Stability and Success (PASS) started in October 2012 we have recorded that foster youth who struggle in school do better when:

- their educational programs are monitored
- have an advocate speak on their behalf
- · change school less often

These students have seen improved school relations, especially when the school, therapist and DCBS worker all work together for the benefit of the child.





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Pathway for Academic Stability and Success (PASS)

University of Louisville

Kent School of Social Work

Who Are America's Youth in Out-of-Home Care?



700,000 plus children and youth will be a part of the foster care system each year.

On any given day in this country, about 423,000 plus ldren are a part of the foster care system.

29,500 youth emancipate from foster care each year

Trauma

Traumatic Stress: an overwhelming experience that involves actual or threatened death, serious injury or threat to physical integrity

- Leaves people feeling helpless and fearful
- Interferes with relationships and beliefs



Herman, J. (1992). Trauma and Recovery. New York: Basic Books.

Effects of Trauma Exposure on Children

Attachment Difficulties



Problems
Focusing &
Completing
Tasks

Poor Impulse Control



Describing Mood/ Feelings

Dissociation/
Detachment/
Depersonalization

Development and Trauma

- Skills specific to each developmental stage build on learning from previous stages.
- Children exposed to trauma invest energy into survival instead of developmental mastery.
- Development in adulthood may continue to be impacted.

Casey Family Programs-Endless Dreams Curriculum

Children in Out-of-Home Care Are Struggling Academically

Youth in care have:

- lower grade point averages
- change schools more frequently
- earn fewer credits toward high school graduation
- have lower scores on state testing.



Reasons for Academic Struggles

► Highly Mobil



Children and youth in out-of-home care experience - on average - 3.2 foster care placement changes per stay.

Frequent school changes are associated with an increased risk of failing a grade in school and of repeated behavior problems.

Casey Family Programs-Endless Dreams Curriculum

Why Focus on Education Stability?

- Students who change high schools even once are less likely than stable students to graduate even when controlling for other factors.
- Students who switch schools frequently score lower on standardized tests; studies have found up to a 20-point difference.
- ▶ Mobile students are less likely to participate in extracurricular activities and more likely to act out or get into trouble.

For research citations, see Fact Sheet: Educational Outcomes for Children and Youth in Foster and Out-of-Home Care, December 2008 www.casey.org

Pathway for Academic Stability and Success (PASS)

What is PASS?

A demonstration project between University of Louisville –
 Kent School of Social Work and community partners

Serves as a model for other regions

Promotes academic stability and success of foster youth

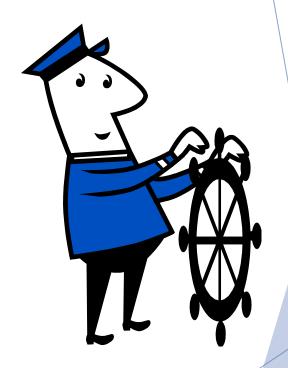
► Grades 6th – 8th

Assessing and developing collaboration between agencies

PASS – Educational Navigators

Educational Navigators

- Assess educational needs
- Advocate for and coordinate services
- Meet with students at school
- Meet with foster parents at home
- Provide support and offer tips



Referring to PASS



 Contact your worker and tell them your foster youth may qualify for services.

- Call Family and Children's Place 893.3900
 - Enrica Thomas or Tonya Clay

Legislation supporting our youth

The McKinney-Vento Homeless Assistance Act

- First passed in 1987.
- ▶ Re-authorized in 2002 by the No Child Left Behind Act.
- ► Main themes of this legislation include:
 - School stability leads to school success.
 - Students need support for academic success.
 - Child-centered with "best interest" decision-making



Family Educational Rights and Privacy Act (FERPA)

- ► Parents or Eligible Students (over 18) can:
 - inspect and review the student's education records
 - request that a school correct records which they believe to be inaccurate or misleading
- Schools must have:
- written permission from the parent or student in order to release any information from a student's education record.

Uninterrupted Scholars Act (USA)

- ► Enacted January 2013
- Easier for case workers to get educational records without consent of biological parent
- Eliminates the requirement that schools notify parents before records are released
- Continues to protect student's confidentiality

Advocating for foster youth

What is an Advocate?

One that pleads the cause of another

One that supports or promotes the interests of another

Advocate. (n.d.). *Merriam-Webster.com*. Retrieved September 10, 2013, from http://www.merriam-webster.com/dictionary/advocate

Important advocacy strategies

- Ask lots of questions and be as informed as possible
- Be organized
- ▶ Be available, always return phone calls and keep appointments
- Avoid "us" versus "them"
- Be persistent-don't easily settle for no
- Learn about your agency's and DCBS policies and procedures
 - Build positive, professional relationships with adults involved with the youth

Questions Comments Post-Evaluation







University of Louisville, Kent School of Social Work



PATHWAY FOR ACADEMIC STABILITY AND SUCCESS (PASS)

To promote academic stability and success of foster youth in 6th through 8th grade at risk for dropping out of school.

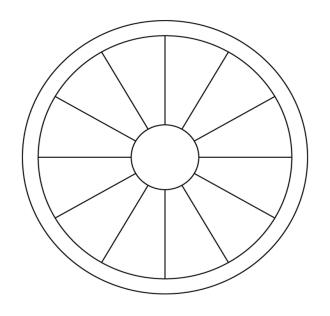
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EXERCISE: KNOW YOUR CHILD'S TEAM



What has worked?

IMPORTANT ADVOCACY STRATEGIES

- Ask lots of questions and be as informed as possible
- Build positive, professional relationships with adults involved with the youth
- Be organized
- Be available, always return phone calls and keep appointments
- Avoid "us" versus "them"
- Be persistent-don't easily settle for no
- Learn about your agency's and DCBS policies and procedures

MOST IMPORTANTLY DOCUMENT



WHAT DOES DOCUMENTATION SHOW?

- Shows a foster child's day-to-day activities
- May show a pattern of child behavior
- May help a child get needed services
- May help you (the fostering family) get needed services and support
- Helps protect you from false allegations

LET'S TAKE A BREAK!

SELF CARING FOR YOU?
WHO IS ADVOCATING

SELF-CARE CHECK UP



IMPORTANT DEFINITIONS

<u>Compassion Fatigue</u> – Fatigue, emotional distress, or apathy resulting from constant demands of caring for others. The weariness that comes from caring.

<u>Burnout</u> – Physical and emotional exhaustion that may include a negative self-concept and job attitudes, a loss of concern and feeling for others. High levels of compassion fatigue may lead to burnout.

IMPORTANT DEFINITIONS:

<u>Vicarious (Secondary) Trauma</u> – Post Traumatic Stress Disorder behaviors & emotions resulting from internalizing events experienced by another.

Vicarious: To feel through the experience of others; a secondary rather than primary experience with significant impact.

SIGNS OF VICARIOUS (SECONDARY) TRAUMA

Personal Impact

- Physical
- Emotional
- Behavioral
- Cognitive
- Relational
- Spiritual

Professional Impact

- Job Tasks
- Morale
- Interpersonal
- Behavioral

SELF CARE TECHNIQUES



MAKE A SELF-CARE COMMITMENT

From now on, I'll make time to take care of myself by doing the followat least	
Once a Day	
Once a Week	
Once a Month	

5 MINUTE MEDITATION

WE WOULD LOVE YOUR FEEDBACK!

